

DSRIP Meeting Agenda

Date and Time	1/20/17, 3:00-4:30PM	Meeting Title	NYP PPS Finance Committee
Location	Milstein Hospital Building, 177 Fort Washington Avenue, Heart Center Room 3	Facilitators	Brian Kurz, David Grayson
Go to Meeting	https://global.gotomeeting.com/join/557555301	Conference Line	United States +1 (872) 240-3311 Access Code: 557-555-301

Invitees	
Co-Chair: David Grayson (Calvary)	NYP Co-Chair: Brian Kurz
Michael Ashby (1199 SIEU)	Judy Hederman (The Alliance for Positive Change)
Rob Basile (Metropolitan Center for Mental Health)	Elan Katz (QuickRx)
Carol Cassell (ArchCare)	Carolyn Wiggins (Fort George Community Enrichment Center)
Dan Del Bene (SPOP)	Steve Zhou (Village Care)
Jay Gormley (MJHS)	

Meeting Objectives	Time
1. Review action items from last meeting	5 mins
2. Co-Chair Position	2 mins
3. Financial Health Assessment	10 mins
4. DSRIP Midpoint Assessment	10 mins
5. Review of financial reports	15 mins
6. ED Care Triage Project Finance Presentation	20 mins
7. Tobacco Cessation Project Finance Presentation	20 mins
8. Location of February meeting	2 mins
9. Identify Action Items	2 mins

Action Items				
Description	Owner	Start Date	Due Date	Status
Address follow-up questions re: SKATE presentation	L. Alexander/l. Kastenbaum	11/11/2016	1/20/2016	Not Started
Confirm dates of the data in the MAPP tool	L. Alexander	11/11/2016	1/20/2016	Complete
Schedule presentation on metrics	L. Alexander	11/11/2016	2/10/2016	Complete
Review October data at next meeting	L. Alexander/l. Kastenbaum	11/11/2016	1/20/2016	Not started
Submit feedback regarding formats of financial reports	Committee	11/11/2016	11/18/2016	Complete

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Michael Ashby (1199 SIEU)	Isaac Kastenbaum (NYP)
Carol Cassell (ArchCare)	David Alge (NYP)
Lauren Alexander (NYP)	Carolyn Wiggins (Fort George Community Enrichment Center)
Patricia Peretz (NYP)	Steve Zhou (Village Care)
Peter Steel (NYP)	David Albert (NYP)
Julie Chipman (NYP)	

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Action Items				
Description	Owner	Start Date	Due Date	Status
Finalize Financial Health Assessment and distribute to network	L. Alexander	1/20/2017	2/7/2017	Complete
Submit formal recommendation to Executive Committee re: incentivizing network participation	Finance Co-Chairs/Committee	1/20/2017	3/20/2017	In progress
Send December financial reports in advance of next meeting	I. Kastenbaum	1/20/2017	2/7/2017	Complete
Add collaborator supporting schedule of expenses to financial reports	I. Kastenbaum	1/20/2017	2/7/2017	In progress

This is an annual survey ~~that will~~ requires you to provide summary-level financial information about your organization. As required by the New York State Delivery System Reform Incentive Payment (DSRIP) Program – each PPS must perform an annual financial health assessment to:

1. Identify those providers in their network that are financially fragile, including those that have qualified as IAAF providers;
2. Define their approach for monitoring those financially fragile providers, which must include an analysis of provider performance on the following financial indicators: days cash on hand, debt ratio, operating margin and current ratio;
3. Include any additional financial indicators that they deem necessary for monitoring the financial sustainability of their network providers

If an organization is found to be financially fragile, the PPS must document:

1. The financial status of those providers identified as financially fragile, including those that qualified as IAAF providers; and how their status impacts their ability to deliver services
2. The identification of any additional financially fragile providers; and
3. The efforts undertaken to improve the financial status of those providers.

This information will not be shared beyond the PPS Finance and Executive Committee. Submission of this form does not guarantee that the PPS will provide financial support, but those safety net providers identified as ‘financially fragile’ will receive guidance from the PPS.

If you have any questions regarding this survey, please do not hesitate to contact ppsmembership@nyp.org.

Organizational Information

Organization Legal Name:

Organization Operating Name (e.g. d/b/a):

Is your organization a parent organization? Y / N

Is your organization a sub-corporation? Y / N

If yes to either, please elaborate:

Organization Type: (SELECT FROM DROPDOWN)

Respondent's Name:

Respondent's Role:

Respondent's Email Address:

Are you a designated safety net provider per New York State?

Organizational Financial Sources:

1. Does your organization provide Medicaid reimbursable services? Y/N
 - a. If Yes, what portion of your annual revenue is driven by Medicaid reimbursement?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

2. Does your organization provide services that are reimbursed through Medicare? Y/N
 - a. If Yes, what portion of your annual revenue is driven by Medicare reimbursement?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

3. Does your organization provide services that are reimbursed through commercial payors? Y/N
 - a. If Yes, what portion of your annual revenue is driven by commercial reimbursement?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

4. Does your organization receive private and/or government grants/philanthropy? Y/N
 - a. If Yes, what percent of your revenue is driven by private (individual or foundation) grants?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

- b. If Yes, what percent of your revenue is driven by government (city, state, federal) grants?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

5. Do you have any other sources of income?
 - a. If yes, what is the source?
 - b. What percent of your revenue is driven by these sources?

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

Organizational Financial Health:

The NYP PPS Finance Committee has established the following criteria and associated thresholds to be used in assessing the financial health of network members. The criteria will be examined for the most recent FY completed.

- Total days cash-on-hand – The PPS recommends no less than 60 days.
- Debt ratio – The PPS recommends a ratio of .5 or less.
- Operating margin – The PPS recommends a margin above 1%.
- Current ratio – The PPS recommends greater than 1.0.

1. **Cash-on-hand:** The number of days of operating expenses that an organization could pay with its current cash available. $(\text{Cash} + \text{Short Term Investments}) / ((\text{Operating Expenses} - \text{Bad Debts} - \text{Depreciation}) / 365)$

Does your organization have no less than 60 days cash-on-hand? YES/NO

If no, *Pplease provide the total days cash-on-hand for the most recent completed FY: _____

INSTRUCTIONS: PLEASE ROUND TO THE NEAREST DAY. DO NOT EXPRESS AS A DECIMAL.

2. **Debt ratio:** Defined as the ratio of total, long-term and short-term, debt to total assets. $(\text{Total Liabilities} / \text{Total Assets})$

Does your organization have a debt ratio of .5 or less? YES/NO

*If no, pPlease provide your debt ratio for the most recent completed FY: _____

INSTRUCTIONS: PLEASE EXPRESS AS A DECIMAL WITH NO MORE THAN TWO DECIMAL POINTS.

3. **Operating Margin:** Indicates how much revenue a company retains after covering its variable costs. $(\text{Change in Unrestricted Net Assets} / \text{Unrestricted Revenue and Support})$

Does your organization have an operating margin above 1%? YES/NO

*If no, pPlease provide your operating margin for the most recent completed FY: _____

INSTRUCTIONS: PLEASE EXPRESS AS A PERCENT WITH NO MORE THAN ONE DECIMAL PLACE.

4. **Current Ratio:** An indicator of liquidity that shows the proportion of current assets of a business to its current liabilities. $(\text{Current Assets} / \text{Current Liabilities})$

Does your organization have a current ratio of greater than 1.0? YES/NO

*If no, pPlease provide your current ratio: _____

INSTRUCTIONS: PLEASE EXPRESS AS A DECIMAL WITH NO MORE THAN TWO DECIMAL POINTS.

5. Please provide any additional relevant information related to the financial health of your organization. If you feel that your organization is financially fragile, please indicate that here.

6. Please indicate your most recently completed fiscal year.

I certify that this information is accurate and complete to the best of my knowledge.

(INSERT electronic signature option)

**AMAZING
THINGS
ARE
HAPPENING
HERE**

Project 2biii – ED Care Triage

Finance Committee Review

January 20, 2017

Agenda

1. NYS Domain 1 Milestones Progress
2. Qualitative Update
3. Project Impact and Outcomes
4. FTE Update
5. DSRIP YTD Budget Review
6. Project Patient Engagement Metric Progress (YTD)
7. NYS Domain 2, 3, 4 Performance Metric Progress
8. Next Steps

NYS Domain 1 Milestone Progress

#	Milestone	Status
1	Establish ED care triage program for at-risk populations.	Complete
2	<p>Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.</p> <ul style="list-style-type: none"> a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers. c. Ensure real time notification to a Health Home care manager as applicable. 	In Progress, no challenges
3	<p>For patients presenting with minor illnesses who do not have a primary care provider:</p> <ul style="list-style-type: none"> a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care provider). 	Complete
4	Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	Not Applicable
5	Use EHRs and other technical platforms to track all patients engaged in the project.	Complete

FTE Update

Position Title	Number of FTEs	Status
Patient Navigator	15.0	Filled
Supervisor	2.0	Filled
Program Manager	1.0	Filled
Office Assistant	1.0	Filled
Physician	0.1250	Filled
Project Manager	1.0	Vacant

Project Progress Update

- **Weill Cornell Medical Center Launch:** November 2015
- **Electronic (Manual) Referral Go-Live:** April 2016
- **Performance Dashboard:** October 2016
- **Lower Manhattan Hospital Launch:** October 2016
- **Tablet Implementation:** November 2016

Project Impact and Outcomes

Metric	Allen, Columbia, MSCHONY	Cornell	Lower Manhattan
	6 years 2009-2015	1 year Nov 2015 – Nov 2016	1 month Oct 2016 – Nov 2016
<i>Metric: Patients served</i>			
Actual	58,961	3,041	475
<i>Metric: % patients without a PCP linked to an appt. with a new provider</i>			
Actual	92%	88%	81%
Target	96%	96%	96%
Variance	4%	8%	15%
<i>Metric: % patients for whom an appt. was scheduled adhered to scheduled appt.</i>			
Actual	77%	80%	78%
Target	78%	78%	78%
Variance	1%	2%	-

* Allen, Columbia, MSCHONY go-live: 2008
 Cornell go-live: November 2015
 Lower Manhattan go-live: October 2016

NYS Patient Engagement Progress

NYS Engagement Definition: *The number of participating patients presenting to the ED, who after medical screening examination were successfully redirected to a PCP as demonstrated by a scheduled appointment, or successfully redirected to a PCP en route to the ED. Duplicate counts of patients are not allowed.*

Metric	DY1Q4	DY2Q1	DY2Q2	DY2Q3
Commitment	10,750	4,000	8,000	12,000
Cross-PPS Reduction	7,525	2,800	5,600	8,400
80% Goal	6,020	2,240	4,480	6,720
Reported Achievement	6,020	2,240	4,480	6,720

NYS Performance Metric Update

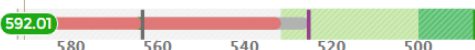
Measures as of April 30th, 2016

Month 10 of 12, Measurement Year 2

Prior Year Result Annual Target Annual High Perf. Goal Monthly Target Zone Monthly High Perf. Zone

Potentially Avoidable Readmissions

Not on Target
▲ 60.53



Explore >

Potentially Preventable ED Visits

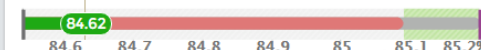
Not on Target
▲ 0.08



Explore >

Adult Access Preventive (20 - 44)

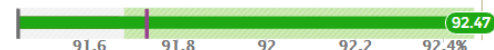
Not on Target
▼ 0.46



Explore >

Adult Access Preventive (45 - 64)

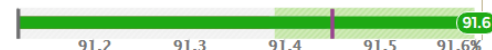
On Target!
▲ 0.8



Explore >

Adult Access Preventive (65 and Older)

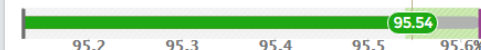
On Target!
▲ 0.21



Explore >

Child Access - Primary Care (12 to 24 M...)

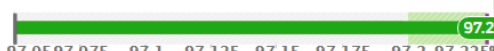
On Target!
▲ 0.00



Explore >

Child Access - Primary Care (12 to 19)

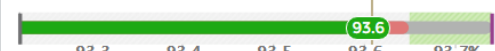
On Target!
▲ 0.03



Explore >

Child Access - Primary Care (25 Months...)

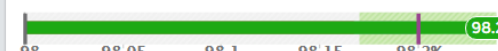
Not on Target
▼ 0.05



Explore >

Child Access - Primary Care (7 to 11)

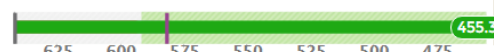
On Target!
▲ 0.07



Explore >

PDI 90 - Pediatric Composite

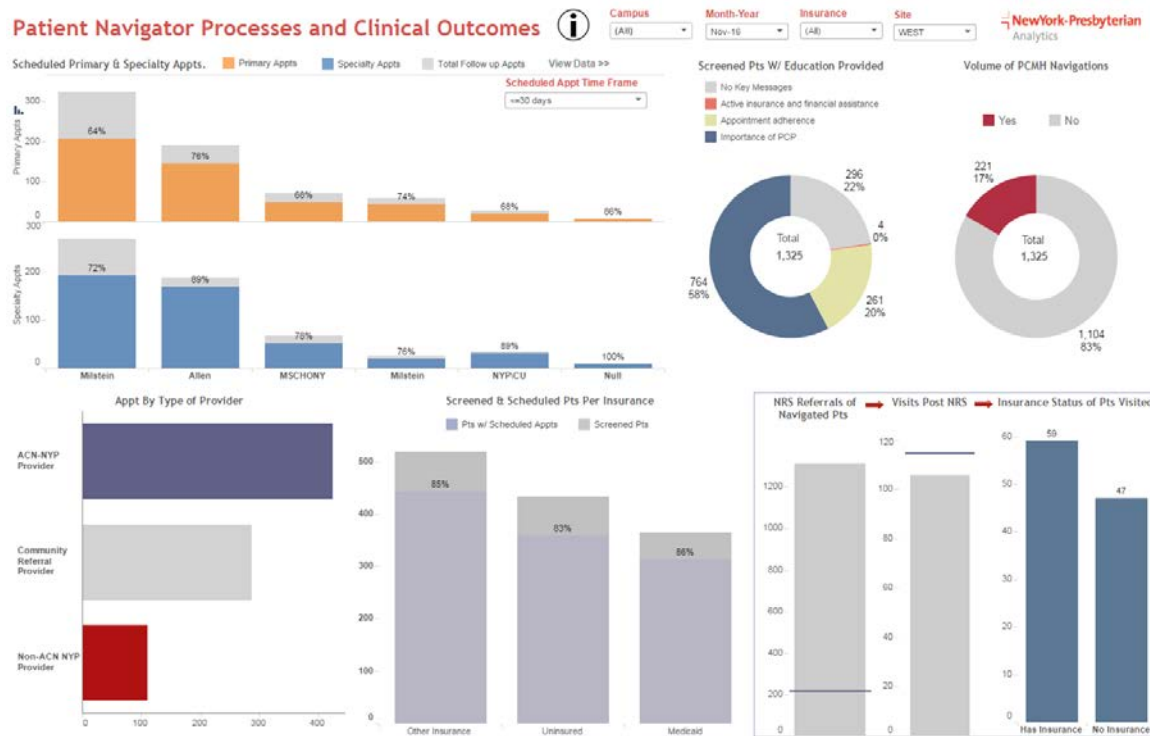
On Target
▼ 136.58



Explore >

Next Steps

- **Automated Order:** Expected go-live March 2017
- **Process improvement:** Refinement of Navigator workflows
- **Reporting:** Backlog monitoring and clinical outcomes/project evaluation dashboard



*Dashboard data is for mock-up purposes only

**AMAZING
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4.b.i Tobacco Cessation

**NYP PPS Finance Committee Meeting
Friday, January 20, 2017**

**David Albert, DDS, MPH, Project Lead
Julie Chipman, LCSW Program Manager**

Agenda

- 1. Qualitative Update: Goals**
- 2. Qualitative Update: Progress**
- 3. DSRIP YTD Budget Review**
- 4. FTE Update**
- 5. Patient Engagement Metrics: NYP EHR Data**
- 6. NYS Performance Metric Update: CAHPS Data**
- 7. Next Steps**

Qualitative Update: Project Goals

- Understand current cessation practices at NYP ACN practices
- Implement EHR-facilitated cessation assessment and counseling at NYP ACN
- Establish sustainable cessation clinics for NYP/CU, NYP/WC, and Lower Manhattan
- Establish cessation treatment at NYSPI outpatient clinics (Inwood and Audubon)
- Develop patient education programs to support tobacco cessation
- Facilitate compliant, consistent and accurate tobacco cessation billing practices at NYP ACN

Qualitative Update: Project Progress

■ TRAINING/EDUCATION

- 20 Provider Trainings completed for ACN Attendings/Trainees
- 5 Nicotine Replacement Trainings provided to ACN Nursing Staff on new NRT stock and waste containers made available throughout the ACN
- 2 of a 6-part Webinar series for the PPS completed in partnership with PPS collaborator agencies**
- 4 Tobacco Treatment Modules developed for the NYP Learning Center and offered to all ACN clinical staff
- CTTS training and additional consultations for PPS Collaborators

■ IT MODIFICATIONS TO THE NYP WEST CAMPUS EHR

- Meaningful Use tobacco screening tool streamlined
- Tobacco treatment notes developed
- Tobacco order set added to Internal/Family Medicine common orders

**Qualitative Update: Tobacco Treatment Online Modules Utilization Since West Campus Roll Out 01/9/17

Notified about training		Completed		In Progress	
Attendings	376	Attendings	19	Attendings	3
Residents	252	Residents	10	Residents	1
Nurse Practitioners	55	Nurse Practitioners	2	Nurse Practitioners	0
Physician Assistants	10	Physician Assistants	0	Physician Assistants	0
Psychologists	10	Psychologists	0	Psychologists	0
Total 703		Total 31		Total 4	
Nurses	66	Nurses	5	Nurses	0
Medical Assts.	86	Medical Assts.	7	Medical Assts.	1
Social Workers	36	Social Workers	0	Social Workers	2
Total 188		Total 12		Total 3	
Notified re. training: TOTAL 891		Completed: TOTAL 43		In Progress: TOTAL 7	

FTE Update

Position Title	Number of FTEs	Campus	Status
Nurse Practitioner	1.0	West	Active
Patient Navigator	1.0	West	Active
Data/Analytics	0.6	West/East	Active
Health Education Specialist	0.7	West/East	Active
Nurse Practitioner	0.2	East	Active
Patient Navigator	1.0	East	Hired
Nurse Practitioner	0.3	CBO	In recruitment
Internal Medicine Consultant	0.1	West	Active

Patient Engagement Metrics: NYP EHR Data for Calendar Year 2016

West ACN Clinic Name	% Current Tobacco Users	% of Current Tobacco Users with a cessation Rx
AIM	8.1	18.4
Broadway Adult	7.5	14.3
CHP Adult	27.1	19.3
Farrell	7.95	15.4
Rangel Adult	6.4	16.8
Washington Heights	5.7	21.3

Patient Engagement Metrics: NYP EHR Data on Tobacco-Cessation Visits

Month	# Of Appointments Scheduled	# Of Patients Seen	# Of No-Shows	# Of Walk-Ins	# Of New Patients	# Of Follow-Ups
August	49	16	33	0	15	1
September	66	27	37	3	20	7
October	133	56	82	10	36	20
November	122	61	66	5	29	32
TOTAL	370	160	218	18	106	54

Meaningful Use Assessment

Clinic Name	% of patients that were assessed for tobacco use 1/11/ 16 – 12/31/16	% of patients that were assessed for tobacco use 1/11/16- 6/30/16	% of patients that were assessed tobacco use 7/1/16-12/31/16
AIM	91.4	87.2	95.7
Broadway Adult	88.5	84.5	92.5
CHP Adult	84.4	75.1	94.8
Farrell	55.0	40.9	69.0
Rangel Adult	96.6	94.7	98.5
Washington Heights	89.9	84.9	95.1

NYS Performance Metric Update - CAHPS

Measure	Current Performance – MY1 (NYP PPS)	Current Performance – MY1 (NYS Average)	Final DSRIP Goal (Year 5)
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	81%	89.15%	95.6%
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	65%	70.91%	83.9%
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	60%	61.93%	75.3%

Source: July 2016 NYS Adult CAHPS Survey Results; data are not currently available in MAPP tool.

Next Steps: West Campus Patient Engagement Projections

2017							
Practice	New Pt. Slots	F/U Slots	Sessions Per Month	Total Slots Per Month	Jan - June 2017	July - Sept 17	Oct - Dec
Rangel	4	4	4	32	8	16	25
VC3	5	4	2	18	5	9	14
AIM East (Tues AM)	5	2	4	28	7	19	22
AIM East (Wed PM)	5	4	4	36	9	18	29
HP6	5	4	4	36	9	18	29
Audubon	4	4	2	16	4	8	12
Broadway	4	4	4	32	8	16	26
Farrell	4	4	4	32	8	16	26
Washington Heights	5	4	4	36	9	18	29
TOTALS			32	266	25% = 67	50% = 133	80% = 212

Next Steps

- **West Campus**
 - Currently in planning phase of tobacco cessation groups
 - Expansion to adult and adolescent behavioral health clinics
- **East Campus**
 - Expansion of tobacco cessation clinic in internal medicine
 - Increase tobacco cessation NP counseling and admin time
- **PPS-Wide**
 - Integrate efforts into the new NYP PPS Population Line Structure
 - CAHPS Engagement Initiative
 - Enhance patient education/PPS TC website
 - Targeted mailing to known tobacco users
 - Tobacco cessation blog
 - Participate in NYP HERCULES Initiative to maximize resources/revenue streams
 - Continue tobacco cessation primary care provider education
 - Develop an adolescent and pediatric tobacco cessation program
 - Provide tobacco cessation training and engagement to CBOs as needed