

**AMAZING
THINGS
ARE
HAPPENING
HERE**

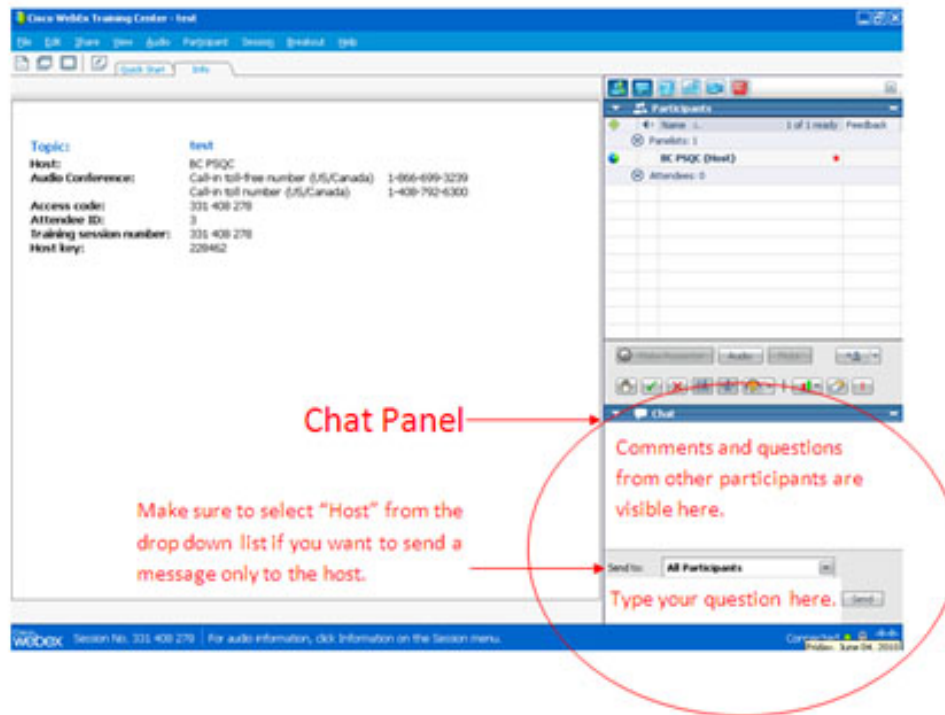
The New York State Value-Based Payment (VBP) Roadmap

Community Based Organizations
February 28, 2018

Housekeeping

All lines have been muted

- To ask a question at any time, use the Chat feature in WebEx
- We will take frequent pauses to open (unmute) all lines for questions



Lesson Learning Objectives – NYS VBP Roadmap

1. Understand how NYS views DSRIP as preparation for ongoing and expanded reimbursement reform beyond the waiver period.
2. Learn how NYS plans to encourage DSRIP objectives and measures to be mirrored in Managed Care Organization (MCO) provider contracts and IPA/ACO arrangements.
3. Learn the key milestones in NYS' timeline for VBP implementation.
4. Understand which patient populations NYS will target for VBP arrangements and which is best for your organization.

Complementary Lesson – VBP 101

Lesson Overview

- Provide basic knowledge of value based payment (VBP) strategy, with a brief history and overview of the core concepts and stakeholders.

What You'll Learn

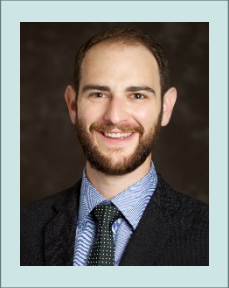
- VBP Basics – What, Why, When
- State & National Trends
- Options for Each VBP Arrangement (Structure & Level)
- Readiness Self-Assessment & Planning

NYP PPS & NYP/Queens PPS Collaborating to Deliver Six VBP Trainings this Winter

Behavioral Health Providers: Session 1	January 17, 2018	3:00pm - 4:00pm	Register Now
Behavioral Health Providers: Session 2	January 30, 2018	3:00pm - 4:00pm	Register Now
CBOs: Session 1	February 13, 2018	3:00pm - 4:00pm	Register Now
CBOs: Session 2	February 28, 2018	3:00pm - 4:00pm	Register Now
Primary Care Providers: Session 1	March 13, 2018	3:00pm - 4:00pm	Register Now
Primary Care Providers: Session 2	March 27, 2018	3:00pm - 4:00pm	Register Now

Welcome & Introductions

Meet your Facilitators!



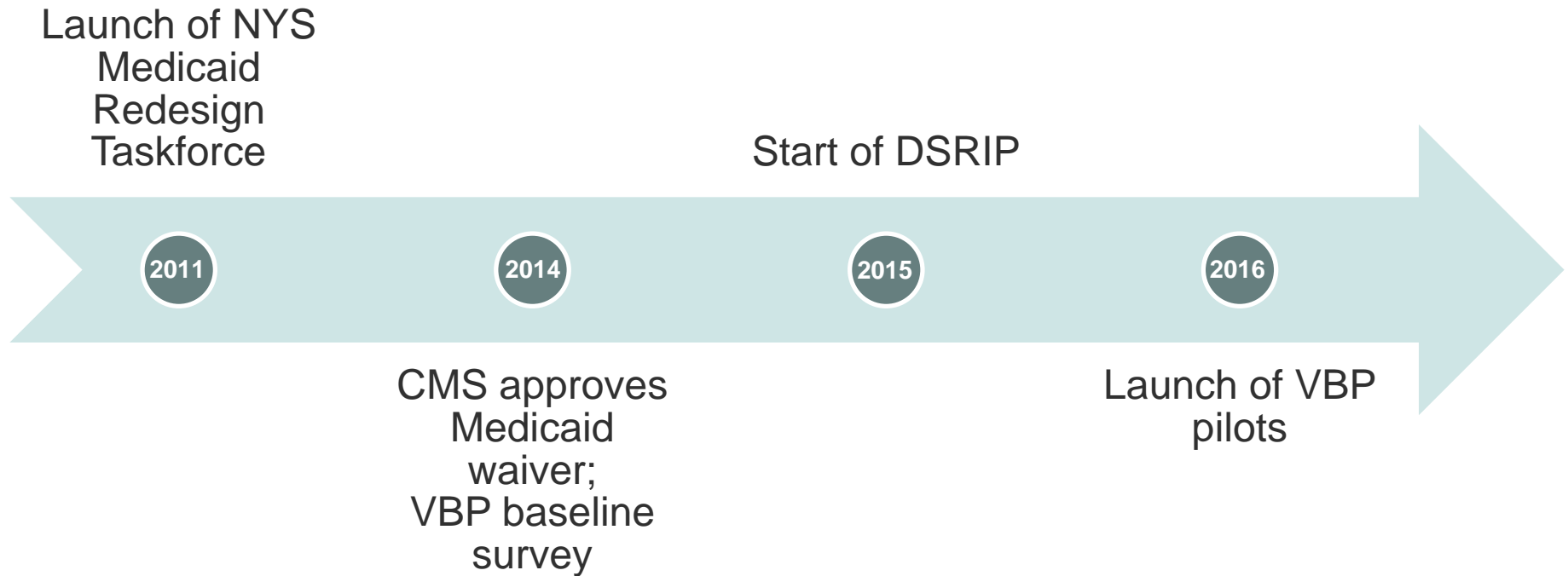
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Brief Background on Evolution to VBP



VBP Risk Levels

VBP Risk Level	Description
0*	Enhanced FFS. Providers may receive a quality bonus, be subject to a quality withhold, or receive a payment for enhanced care coordination. There is no provider risk (*and therefore not considered for the 2020 Goal).
1	Upside only shared savings without provider risk. Providers still receive FFS payments, but have incentive to reduce costs and improve quality through a shared savings arrangement tied to cost benchmarks and quality metrics. There is no “downside” risk, so providers do not have to pay money to MCOs if they exceed cost benchmarks.
2	Upside and downside risk-sharing arrangements. As in Level 1, providers have a shared savings incentive, but are also accountable if costs exceed benchmarks and must reimburse MCOs a percentage of the excess amount if this is the case.
3	Prospective payments that largely replace FFS. MCOs pay providers on a per member, per month (PMPM) basis for a patient’s TCOC. Providers may also be paid on a prospective basis for a bundled payment for a specific episode of care or for managing a specific chronic condition.



Relevant Points from the NYS VBP Roadmap Doc

1. Guidelines promote MCOs to incentivize CBOs (really all providers) to identify SDH interventions and support implementation.
2. Encourages MCOs to measure intervention success using patient reported outcomes.
3. Embeds Tier 1 CBOs as required partners in VBP Level 2/3 arrangements.

VBP Readiness: What Should I be Doing Now?

1. Understand if your organization is a Tier 1, 2 or 3 CBO:
 - Tier 1: Non-profit, non-Medicaid billing, community based social and human service organizations (e.g. housing, social services, religious organizations, food banks);
 - Tier 2: Non-profit, Medicaid billing, non-clinical service providers (e.g. transportation, care coordination);
 - Tier 3: Non-profit, Medicaid billing, clinical and clinical support service providers (licensed by the NYS Department of Health, NYS Office of Mental Health, NYS Office for Persons with Developmental Disabilities, or NYS Office of Alcoholism and Substance Abuse Services).

2. Note: Tier 1 CBOs are ***not required*** to enter into a risk sharing agreement to satisfy the Tier 1 CBO contracting requirements in Level 2 and 3 arrangements.

VBP Readiness: What Should I be Doing Now?

3. Assess your business model to understand the types of social determinants of health you may address and which VBP arrangements you may best support.
 - Align your business model and populations served (e.g. prenatal support services = Maternity Arrangement; supportive housing = Integrated Primary Care (IPC)).

Let's Acknowledge Key Limitations

The NYS VBP Roadmap is *not*:

1. A complete blueprint with instructions.
2. Specific on how quickly organizations must transition to higher risk, beyond the collective goals indicated for the State as a whole.
3. A negotiation guide between providers and MCOs.



VBP Resources for CBOs

- SCAN Foundation Linkage Lab Initiative
- Community-Based Integrated Care Networks - Example of Network Integration for CBOs in Western New York
- **GNYHA Value-Based Payment Fundamentals Guide Document:**
 - Appendix B: DOH Social Determinants of Health (SDH) Intervention Menu Excerpt
 - Appendix C: Framing how CBOs add value

Resources can all be found in “**VALUE-BASED PAYMENT FUNDAMENTALS: A Guide to New York State Medicaid Value-Based Payment**” (Greater New York Hospital Association)

Appendix C: Framing how CBOs Add Value

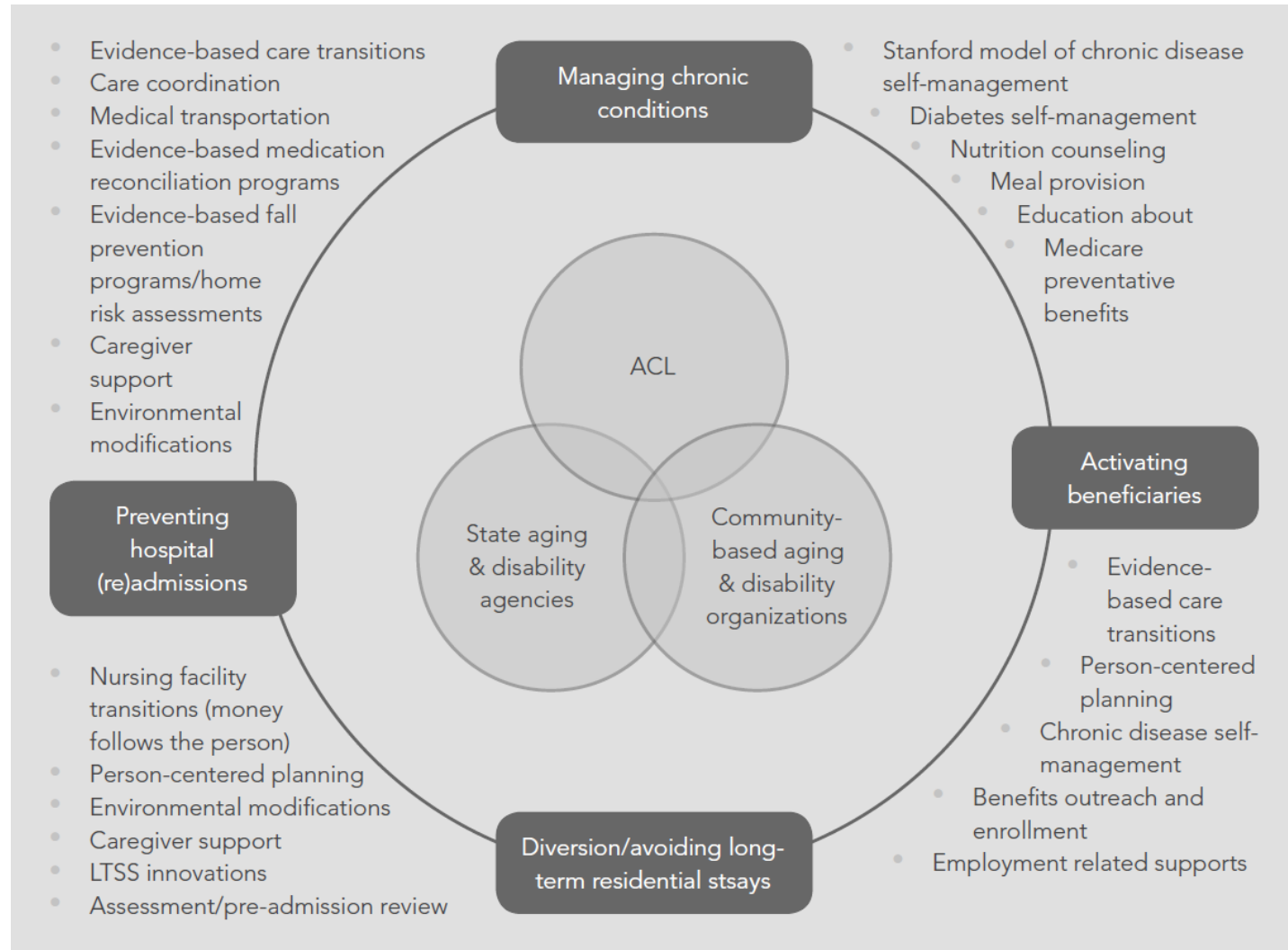


Image from “**VALUE-BASED PAYMENT FUNDAMENTALS: A Guide to New York State Medicaid Value-Based Payment**” (Greater New York Hospital Association). Originally developed by the Administration for Community Living.

Other Resources

1. [The NYS VBP Roadmap](#) (pdf)
2. [Navigating the New York State Value-Based Payment Roadmap](#) (web)
3. [VBP Implementation: Community Based Organization Guidance](#) (pdf)

Contact Us

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Find More Online & Share

**All VBP presentations and registration links available:
Section, “Population Health Care Models”**

<http://www.nyp.org/pps/resources/pps-webinars>

