

NewYork-Presbyterian PPS Newsletter

Welcome to the February 2016 NYP PPS newsletter!

Project Spotlight: This month we would like to highlight the exciting work of the Emergency Department (ED) Care Triage project. This project features the innovative use of a Patient Navigator model to address the healthcare access, educational and cultural influences of ED utilization for non-acute care. Patient Navigators meet with patients who are identified as high-risk following ED triage. The Navigators initiate a peer-support assessment to both learn the patient's barriers to outpatient care and educate them on how best to navigate the health care system. Working with the ED care team, the Navigators subsequently focus on identifying and scheduling appropriate primary care, specialty care and non-physician services for the patient. The Navigators also address any obstacles the patient may encounter in adherence with their post-ED care, including linking them to financial assistance, social services, and community-based resources such as home care. Post-discharge, the Navigators conduct appointment reminders and post-appointment follow-up calls to optimize patient compliance with the discharge plan and enhance patient education and satisfaction. The primary goal of this project is reduce ED encounters and hospital admissions for non-acute care by establishing continuity of care with longitudinal primary care at medical homes. Current activities of the project have focused on integrating the Navigators early in patients' emergency department visits, launching of the Patient Navigator Program at the Weill Cornell campus (including hiring and training the local team), and recruitment of the Lower Manhattan Hospital campus team members.

Updated Website for NYC REACH: The NYP PPS would like to share information about the launch of the updated NYC REACH [website](#), a resource that we hope our collaborators will find useful. NYC REACH is a program administered by the Primary Care Information Project (PCIP) at the New York City Department of Health and Mental Hygiene that supports providers with Health IT, quality improvement and practice transformation to new payment models. The NYC REACH website features a members section with resources like policy updates, tip sheets, webinars and other

materials to support participation with Meaningful Use, Patient-Centered Medical Home, DSRIP and much more. Membership and access to these resources is free. If you are not a member and would like to join NYC REACH or need more information, contact them here: <http://nycreach.org/contact-us/>.



Project Advisory and Oversight Panel Presentation: The NYP PPS was pleased to provide an update on its activities at a meeting of the Project Advisory and Oversight Panel (PAOP) on January 22, 2016. The PAOP is a consumer and health system stakeholder advisory group whose responsibility is to assist NYS in the ongoing oversight and monitoring of the DSRIP program. The NYP PPS presentation to the PAOP focused on collaborator engagement, governance structure, funds flow, staff recruitment and network interconnectivity. Presentations from the January 21 and 22 PAOP meeting can be found [here](#).

Achievement Values: The NYP PPS is happy to report that it received its full Achievement Values (AVs) for the quarterly reporting period DY1, Q2. PPS progress on milestones and performance measures is tracked through a system of Achievement Values (AVs). AVs are points received by a PPS for reaching process milestones or a specified performance on measure targets during a specific reporting period. AVs are used to determine incentive payments based on process and performance on a project-by-project basis. A PPS is paid the relative share of the allocated project award (as determined at the onset of the DSRIP program as part of project valuation) for a given payment period based on the share of potential AVs earned for that project. Please click [here](#) to learn more about AVs and click [here](#) to see the NYP PPS AV achievement log for DY1, Q2.

Collaborator Spotlight: This month we would like to highlight collaborator organization, AIDS Healthcare Foundation. Since 1987, AIDS Healthcare Foundation (AHF) has been on the forefront of providing cutting-edge medicine and advocacy, and currently services over 520,000 patients worldwide. AHF continues to expand efforts to reach people living with HIV in NYC, as well as address the social and cultural issues impacting communities. AHF is currently providing HIV medical, public health and pharmacy services in Brooklyn, Queens and Manhattan, and have

affiliated with the AIDS Center of Queens County to provide a large array of support services. In addition, prescriptions filled through an AHF Pharmacy lend assistance to people living with HIV/AIDS globally. Please go to www.hivcare.org for additional location information. For more information on NYC programs, contact Michael Camacho at Michael.camacho@aidshhealth.org.

Staff Spotlight: This month's staff highlight is focused on Psychiatric Nurse Practitioners, Adam Kozikowski, PMHNP-BC, and Crystal H. Kim, PMHNP-BC, who joined the PPS's Behavioral Health Community Crisis Stabilization Services project in the summer of 2015.

Prior to joining NYP, Adam served in a variety of hospital settings and has nursing experience in a

Comprehensive Psychiatric Emergency Program

(CPEP) as well as inpatient psychiatry and addictions. Adam worked in the community on an Assertive Community Treatment (ACT) team and as a NP in a community-based substance abuse treatment program. Crystal also brings extensive experience in emergency psychiatric care as a Nurse Practitioner for Elmhurst Hospital's CPEP and as a medical-surgical RN in Neuroscience at NYP Weill Cornell Medical Center for six years.



In the spirit of integrated collaborative care delivery, Adam and Crystal's reach extends beyond the traditional roles of Nurse Practitioner by forming on-going relationships with the PPS's collaborator organizations and building treatment concepts and interventions beyond the four walls of the hospital. Both Adam and Crystal are actively identifying and developing strong therapeutic connections with high utilizers of behavioral health services in NYP's CPEP in order to implement lasting and novel interventions for this vulnerable population who are in crisis and are often disconnected from community-based care.

Adam and Crystal have both displayed tremendous versatility in working with patients with a wide-variety of behavioral health diagnoses. They form a consistent treatment team, devoting more attention to high utilizers which allows for highly individualized, continuous assessment and problem-solving opportunities to manage a complex series of medical, behavioral and systems challenges. As the project continues to develop in the coming years, Crystal and Adam will have a vital role in collaborating with the Critical Time Intervention team in guiding community-based care for the project's recipients and sharing their expertise with other disciplines engaged in the project.

Collaborator Symposium Recap: We wanted to share a few highlights from our recent Collaborator Symposium held last month. We had approximately 60 attendees in total; of those, 34 individuals attended from 29 collaborator organizations that

represented a wide-range of services. Some of the main themes we heard from the small-group discussions centered around:

- The need to develop standardized assessment tools across the PPS, such as one focused on social needs.
- The desire for more education and training for PPS members across a range of topics, such as care managers training and education on health information technology tools (i.e. RHIOs). There was also a strong desire for education around services offered by the varying organizations across the PPS and how to make appropriate referrals.
- The need for enhanced communication and streamlined care coordination, including creating standardized communications tools and referral processes, developing clear definitions of care coordination and warm handoffs, and having a better understanding of care coordination workflows across organizations. There was also a clear desire to develop designated care coordinators/liaisons across the network.

The discussions were enlightening and generated a number of areas for our PPS to tackle with regard to care coordination, many of which will take the course of DSRIP to address. In the coming months, the NYP PPS will work to address the following ideas generated at the Collaborator Symposium:

- Providing more education around interoperability, RHIOs and Healthix
- Developing outlets for our PPS members to learn more about one another, including:
 - the creation of educational materials about DSRIP and the NYP PPS;
 - providing tours of the NYP Ambulatory Care Network and our collaborator organizations;
 - inviting collaborators to share information about the services they offer; and
 - developing a community resource list that will include collaborator information and referral details.

Check Out the New Home for the MIX on LinkedIn! The MIX, a NYS digital platform for sharing and learning around DSRIP, is excited to announce that it has transitioned to a

LinkedIn group called the New York State Delivery System Reform Incentive Payment (DSRIP) Program group. Please click [here](#) to join the group. The NYS DSRIP Team and the MIX Team are looking forward to continuing DSRIP discussions in this new LinkedIn group and feel that this professional networking tool will enhance connection and collaboration among DSRIP colleagues and stakeholders.

Delivery System Reform Incentive Payment Program

MRT InnovationeXchange



Opt-Out Letters: The New York State Department of Health is completing its second round of "opt-out" letters to Medicaid beneficiaries. The first round, completed in 2015, focused on 700K beneficiaries with recent emergency department and hospital use; this second round will go out to the remaining members. To note, the letter includes a listing of local PPSs based on the patient's residence. For patients who live in one borough but seek care continuously in another, they may not see their usual provider (i.e., NYP, Mt. Sinai, HHC, etc.) listed. For more information, please see the State's page here:

http://www.health.ny.gov/health_care/medicaid/redesign/dsrip/consumers.htm.

Please do not hesitate to contact us at ppsmembership@nyp.org if you have any questions.