

Business Operations and IT Committee Meeting

Attachment A

Meeting Summary

April 25, 2016

199 Water Street, 31st Floor, New York, NY

5:30 – 7:00 PM

In Attendance:

- Sal Guido (NYC Health + Hospitals /IT)
- Christina Jenkins (OneCity Health Services)
- Richard Keller (All Metro Health Care)
- Al Marino (NYCIG RHIO)
- Mike Matteo (CenterLight Health System)
- Richard Miller (SUNY Downstate Medical Center)
- Alina Moran (NYC Health + Hospitals/Elmhurst Finance)
- Dilip Nath (SUNY Downstate Medical Center)
- Gary Stankowski (NADAP)
- Inez Sieben (OneCity Health Services)
- *OneCity Health Services (Committee Support)*
 - *Alison Leung*
 - *Tatyana Seta*
 - *Wilbur Yen*

Members Not In Attendance:

- Michelle Daniels-DeVore
- Juan Maluf
- Krista Olson

| Item | Notes |
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| 1. Committee Updates | <ul style="list-style-type: none"> • Update provided by Sal Guido. <ul style="list-style-type: none"> ○ Hugh Hale will no longer be serving as a committee member. Committee will seek to fill his seat. |
| 2. Review of the March 14, 2016 meeting minutes | <ul style="list-style-type: none"> • March 14, 2016 meeting minutes approved. |
| 3. CEO Updates | <ul style="list-style-type: none"> • Updates provided by Christina Jenkins. <ul style="list-style-type: none"> ○ All 167 achievement values were met for Demonstration Year 1, Quarter 3. ○ OneCity Health continues to work with other Performing Provider Systems (PPSs) and the New York State Department of Health (NYS DOH) to ensure targets and requirements will result in feasible and meaningful changes. |
| 4. Demonstration Year 1 (DY1) Funds Flow | <ul style="list-style-type: none"> • Updates provided by Inez Sieben. <ul style="list-style-type: none"> ○ Quarterly report for Demonstration Year 1, Q4'DY1 Report is due at |

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| | <p>the end of April and is currently being compiled.</p> <ul style="list-style-type: none"> ○ Committee members reviewed Demonstration Year 1 PPS Budget Report Baseline and Actuals. |
| <p>5. Funds Flow and Partner Contracting</p> | <ul style="list-style-type: none"> ● Updates provided by Inez Sieben. <ul style="list-style-type: none"> ○ Employing a phased approach to contracting to allow for learning about project implementation, partner capabilities and interest, market drivers, and patient flow between projects and partners. ○ Phase 1 of contracting is through March 31, 2017 and has three components: <ul style="list-style-type: none"> ▪ Projects with distinct schedules or contracts <ul style="list-style-type: none"> ● Certain projects are ready for, or are already actively in implementation with partners that indicated interest. ▪ Master Partner Data Survey <ul style="list-style-type: none"> ● Currently obtaining certain new and confirming existing partner information that will help inform the design of a comprehensive Schedule B for remaining projects. ▪ Comprehensive Schedule B <ul style="list-style-type: none"> ● Includes 7 projects. ● Anticipated contract period for Comprehensive Schedule B is July 1, 2016 – March 31, 2017. ○ The basis of partner payments mirrors that of NYS DOH payments to the PPS. <ul style="list-style-type: none"> ▪ In Phase 1 schedules, payment is primarily for reporting of defined patient engagement activities. ▪ Phase 2 payment structure, which begins April 1, 2017, will follow the DSRIP model and move toward value-based payments and incorporate shared risk. ○ Funds Flow and Population Health Improvement <ul style="list-style-type: none"> ▪ DSRIP funding includes some allocation for services currently uncovered by Medicaid. Many OneCity Health partners provide services regardless of patient insurance status as part of their mission. ▪ During Phase 1 contracting, the budget will incorporate a projected uninsured patient population. <p><i>Decision Items</i></p> <ul style="list-style-type: none"> ● Funds Flow: Health Home At-Risk <ul style="list-style-type: none"> ○ Health Home lead agencies and their subcontracted Care Management Agencies (CMAs) will provide outreach, care coordination and care management services to patients with one chronic disease and are at-risk of worsening health. ○ Proposed funds flow approach provides payment for project start-up costs, completion of a comprehensive assessment and care plan, outreach efforts and care coordination services with an additional payment for patients with certain social risk factors. ○ Following an in-depth discussion, Committee recommended Health Home At-Risk Funds Flow for Phase 1 (through March 31, 2017) for up to \$10.3M for approval by the Executive Committee. |

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| | <ul style="list-style-type: none"> • Funds Flow: Asthma Home-Based Self-Management <ul style="list-style-type: none"> ○ Community Based Organizations (CBOs) that have Community Health Worker (CHW)-type services will conduct patient outreach, perform home environmental asthma assessments and provide care coordination services for pediatric patients with uncontrolled asthma. ○ Proposed funds flow approach provides payment for initial patient engagement, home evaluation, clinician conference, and outreach efforts. ○ Committee recommended Asthma Home-Based Self-Management Funds Flow for Phase 1 (through March 31, 2017) for up to \$3.8M for approval by the Executive Committee. • Funds Flow: Asthma Home Remediation <ul style="list-style-type: none"> ○ Department of Health and Mental Hygiene (DOHMH) Healthy Homes Program is uniquely positioned to improve home conditions through: <ul style="list-style-type: none"> ▪ Assessment and enforcement to reduce environmental hazards ▪ Advocacy to improve housing conditions on behalf of patients through partnering with housing and other city agencies ▪ Engaging pest control entities as appropriate ▪ Community health worker training module on effective in-home environment assessments ○ Proposed funds flow approach is being finalized; proposed structure includes payment for integrated pest management, reinforcement of patient education, community health worker training, and advocacy. ○ Committee recommended Asthma Home Remediation Funds Flow structure and maximum spend for Phase 1 (through March 31, 2017) for up to \$1.2M for approval by the Executive Committee. |
| 6. Next Steps | <ul style="list-style-type: none"> • Next meeting: May 23rd, 2016. |