

# **ONECITY HEALTH PARTNER WEBINAR**

## Completing the Phase III Contracting Survey & Highlighting our Asthma Initiatives

August 8, 2017

**NYC**  
**HEALTH+**  
**HOSPITALS**

**ONECITY**  
**HEALTH**

## Today's Presenters

- **Richard Bernstock,**  
Bronx Hub Executive Director
- **Lindsay Donald,**  
Assistant Chief Program Officer
- **Rob Houston,**  
Senior Director, Network and VBP
- **Yolanda Smith, Tarun Suri & Mikael Philip,**  
OneCity Health's Asthma Team

## OneCity Health Partner Webinar Series Logistics

General partner questions and comments will be addressed today via the chat function. We'll stop and ask for questions when you see the following symbol:



- If we are unable to answer a general question, we will address it in a future newsletter
  - For questions unique to you, we recommend you contact our support desk
  - To ask a question, send a message to “OneCity Health Questions”
- 
- You can find slides from our previous webinars in the “News” section of our website, or by clicking the “Webinars” tab under “Partner Resources”. Slides are posted immediately after the webinar, and the recording as soon as it's available
  - To ensure our emails and newsletters are not trapped in your spam filters, please add our email addresses ([DSRIPSupport@nychhc.org](mailto:DSRIPSupport@nychhc.org) and [ochsupportdesk@nychhc.org](mailto:ochsupportdesk@nychhc.org)) to your email address book

# Topics for Today's Webinar

- Final Phase I reminders

# August 7 was the Last Day to Remediate Phase I metrics

## Phase I is Now Closed

We do have a few final reminders for Phase I

### Phase I Patient Engagement metrics are still pending

- As a reminder, we expect to hear from New York State this month if the OneCity Health PPS collectively met its Patient Engagement targets
- If we did, all eligible partners will be paid; an invoice will be automatically generated for each eligible partner in the OneCity Health Partner Portal, which you will need to attest to in order to be paid
- We will inform you if this invoice has been generated for you

### Phase I invoicing remains open – but will close soon!

- **The deadline to invoice for approved Phase I metrics is September 30, 2017**
- You have already EARNED this money, please invoice to receive it
- Call our support desk if you have questions

# Final Phase I Reminders

## The 100% Achievement Metric

- With Phase I closed, 54 partners officially earned the Phase I Achievement Metric (submitted all Phase I Operations & Outcomes, Participation, and Data & Tracking metrics)
- We will email those partners this week with additional instructions
- An invoice will be generated for those partners, which will need to be submitted on the OneCity Health Partner Portal



# Topics for Today's Webinar

- Final Phase I reminders
- Upcoming Phase II deadlines

# Extended to August 31: NPI Survey & Phase III Contracting Survey

## Due August 31, 2017 (previously due August 15, 2017): NPI Survey

All partners need to complete the NPI survey, which is metric PM016

Partners who do not bill Medicaid, Medicare, or private payers, may not have any NPIs associated with their organization or staff members. **These partners are still required to complete this survey**, as it provides an opportunity to verify and update your organizational contact information as well

- The June 2017 Phase II OneCity Health Partner Reporting Manual has background on page 33
- We emailed detailed instructions to complete the metric on July 28; we will also post those to our website today. Visit the Newsroom and click the post that recaps today's webinar

Following some questions at our Office Hours session last week, we want to share additional helpful information:

- Even if you do not need to complete Modules 2, 3 or 4, you still need to go into them and mark them as "Complete", even if you didn't fill in any information
- Some partners have an issue where your MMIS and NPI numbers conflict; if so, you should provide us with the NPI number of the provider/organization only
- Please continue to reach out to our support desk with questions



# Extended to August 31: NPI Survey & Phase III Contracting Survey

## Due **August 31, 2017** (originally due July 31, 2017): Phase III Contracting Survey

All partners need to complete the Phase III Contracting Survey, which is metric PM029

- It is available to complete on the OneCity Health Partner Portal today
- For reference only, we will email it to you this afternoon and post it to our website. It must be completed on the OneCity Health Partner Portal

The goal of the Phase III Contracting survey is to allow each partner the opportunity to update information that will inform Phase III contracting

- We will go into more detail on this survey later in this webinar
- The June 2017 Phase II OneCity Health Partner Reporting Manual has background on page 54



# Keep in Mind, These Two Surveys will Inform Phase III Contracting. Here is a Recap of our Partner Engagement Indicators

## Partner Engagement:

- Throughout Phase II, OneCity Health aims to continue to provide you with monthly webinars, quarterly PAC meetings, and quarterly 1:1 partner check-ins between each partner and our OneCity Health implementation team
- We expect that our partners participate in, at minimum, one of these activities per quarter

## Partner Reporting: We expect that in order to be considered for a Phase III contract partners will:

- Submit at least 50 percent of your Comprehensive Schedule B metrics on time
- Submit the Partner Network & Gap Assessment Survey (PM007 – **deadline has passed**) Phase III contract survey metric (PM029) and NPI Survey (PM016)
- Submit the DSRIP compliance attestation (thank you to everyone for submitting the attestation. Please note this will be a yearly requirement)



## Five Process Metrics are due September 29

These metrics are not yet ready to complete on the OneCity Health Partner Portal, but we want to make sure they are on your radar for September. We will provide any additional details you may need in next month's webinar. As a reminder, you only need to complete the metrics in your Comprehensive Schedule B

**PM004 (HIV)** - Complete HIV Assessments of Program Interventions survey; more information can be found on page 17 of the June 2017 Phase II OneCity Health Partner Reporting Manual

**PM014 (Integrated Delivery System)** – All partners are required to complete the Financial Assessment survey; more information can be found on page 30 of the June 2017 Phase II OneCity Health Partner Reporting Manual

**PM019 (Cardiovascular Disease Management)** – Complete the Cardiovascular Practice Assessment survey; more information can be found on page 37 of the June 2017 Phase II OneCity Health Partner Reporting Manual

**PM023 (Integrated Delivery System)** - For substance abuse treatment providers, demonstrate implementation of a process by which informed consent for the sharing of medical records is routinely discussed with patients; more information can be found on page 44 of the June 2017 Phase II OneCity Health Partner Reporting Manual

**PM026 (Health Home At-Risk)** - hold an initial meeting with Health Home providing Health Home At-Risk services to your site, and develop joint workflows; more information can be found on page 50 of the June 2017 Phase II OneCity Health Partner Reporting Manual

## Policy Regarding Technical Issues on the Portal

Due to many partners requesting extension of metric due dates due to technical issues with the OneCity Health Portal, we have developed the following policy to address this issue

Effective today, if you are experiencing any technical issues with reporting on a metric in the OneCity Health Partner Portal, you must report the technical issue to the Support Desk by 5 p.m. on the day of the reporting deadline in order to be considered for an extension of the metric due date

Additionally, you must also email screenshots or a video recording of the issue to the Support Desk or contact the Support Desk to allow them to record the technical issue, via WebEx, in real time. OneCity Health will review your supporting evidence and determine whether or not it is a technical issue and therefore warrants an extension of the metric due date

If you miss a metric deadline and cite a technical issue as the reason for doing so but did not follow the procedure above you will not be considered for an extension of the metric due date

The support desk is available from  
9 a.m. to 5 p.m. on weekdays:

**Email: [ochsupportdesk@nychhc.org](mailto:ochsupportdesk@nychhc.org)**

**Phone Number: 646-694-7090**



# Topics for Today's Webinar

- Final Phase I reminders
- Upcoming Phase II deadlines
- Completing the Phase III Contracting Survey

## What is the Purpose of the Phase III Contracting Survey?

- In Phase II contracting, our goal was to initiate our focus on outcomes-based measures and make metrics more targeted to partners' services
- Our goal for Phase III contracting, which begins January 1, 2018, is to build on these efforts
- Specifically, for Phase III, our aim is to:
  - Distribute money to partners more quickly, and in a more intuitive way
  - Develop long-term partnerships between Performing Provider System (PPS) partners
  - Simplify our contracting methodology and continue to align it with what is most important for the people we serve – improving quality and health outcomes, and empowering our partners to make this possible by enhancing cross-network collaboration
- In order for us to take these important steps, we need some information from you. That is why we are asking you to complete the Phase III Contracting Survey (PM029) by August 31, 2017
- Some of the questions in the Survey, which is less than 10 questions, will be simple updates. We are also asking for some new information as well

## What is in the Phase III Contracting Survey?

- You may remember completing the Master Partner Data Survey, which kicked off Phase I contracting
- Similarly, this survey will inform Phase III contracting. However, in this one, we are asking each partner to confirm a single partner type
  - We are validating the partner type for each OneCity Health partner, to be used as an input to the Phase III Comprehensive Schedule B contracting process
  - We understand that your organization may provide a number of services, however, we are identifying each partner's primary type (meaning where the majority of the organization's revenue and/or expenses are focused)
- We will suggest a partner type for you based on our current information, but you will be able to suggest a change
- We will be using 12 partner types (down from 36). These 12 types are those defined by New York State
- Having each partner confirm a single partner type enables:
  - Streamlined contracting process
  - Better focus on priorities that improve patient outcomes
  - Alignment with New York State's methodology

## What are the Partner Types?

Over the next few slides are the definitions for each partner type. These will also be in the Phase III Contracting Survey itself.

Hospital	Partners providing acute inpatient services including acute inpatient rehabilitation as well as all partners operating or controlling hospital-based primary care, mental health, substance abuse, and other ambulatory or specialty care clinics or practices
Nursing Home	Partners primarily providing Skilled Nursing Facility services (including sub-acute rehabilitation); partners providing any acute inpatient services must be classified as Hospital.
Clinic	Partners providing free-standing clinic (including FQHC and Article 28 D&T) or an OASAS or OMH clinic providing medical services other than hospital-based (which must be classified as Hospital)
Mental Health	Partners primarily providing mental health services including Residential Treatment (note, hospital-based mental health partners must be classified as Hospital)
Substance Abuse	Partners primarily providing substance abuse services including inpatient and outpatient (note, hospital-based substance abuse partners must be classified as Hospital)
Hospice	Partners primarily providing hospice services (care to terminally ill individuals that focuses on easing symptoms rather than treating disease); partners providing any acute inpatient services must be classified as Hospital.
Primary Care Practitioner - Medical	Physicians, nurse practitioners, and practices (but not Clinics or hospital-based practices or their employees) that focus on primary care
Specialist Medical Practitioner	Physicians, nurse practitioners, and practices (but not Clinics or hospital-based practices or their employees) that focus on specialty care



## What are the Partner Types?

Practitioner - Other	Dentists and all other practitioners and practices (but not Clinics or hospital-based practices or their employees) providing clinical services
Health Home	Partners serving as Lead Health Home providers; partners providing any inpatient or outpatient care directly should select one of the above categories.
Case Management	Partners primarily providing case management services including those specific to early Intervention, OMH, OASAS, HIV/AIDS; partners providing any inpatient or outpatient care directly should select one of the above categories.
Pharmacy	Partners primarily providing outpatient pharmacy services such as the preparation and dispensing of drugs as well as the counseling of patients in the proper use of these drugs
Home Health	Partners primarily providing home health services (health service provided in the patient's home to promote, maintain, or restore health or lessen the effects of illness and disability); partners providing inpatient or outpatient care in facilities or their offices or case management services should select one of the above categories
Other Clinical	Partners providing generally billable clinical services not listed above
Other Non-Clinical	Partners providing non-clinical services billable to Medicaid or other healthcare payers (e.g. transportation)
CBO - Social and Human Services	Nonprofit, community-based partners who provide social and human service (e.g. housing, social services, religious organizations, food banks) not billable to Medicaid or other payers
CBO – Other	Nonprofit, community-based partners who only provide services that are neither social or human service in nature nor billable to Medicaid or other payers
Government	Any government agency providing services not billable to Medicaid or other payers

## In Addition to Partner Type, We Ask Other Basic Questions

We would like to know the types of software you currently use (if any) to make and receive referrals

- This helps us determine the best way to connect with you

For our community-based organization (CBO) partners, we would like to know the types of services you provide and your capacity to provide a specific set of services

- This helps us determine how to refer people to you for certain needs

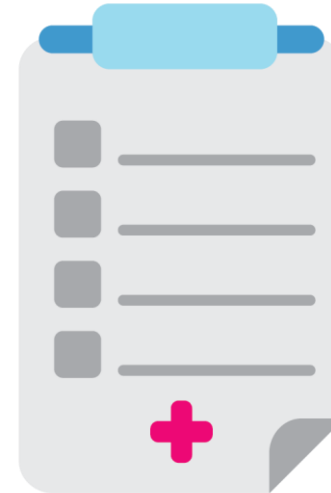
For our Care Management organization partners, we would like to know:

- Your Health Home relationships, so we can determine referral patterns
- Your ability to track individual level data, so we can work together to coordinate care effectively between partners



# The Phase III Contracting Survey is Due August 31

- As a reminder, this is a Partner Engagement Indicator for Phase III Contracting
- We will email a PDF of this survey to you right after this webinar; it will also be available on our website
- The PDF is FOR REFERENCE ONLY; you must complete the survey on the OneCity Health Partner Portal. It will be available today
- If you have questions
  - We are holding an Office Hours session on August 22 at 1:30 p.m., which is an opportunity for you to call in and ask questions that you may have about the instructions and mechanics of completing and submitting the survey. It is an open session, and you can call in at any time to ask a question. Call-in details are on our website, and will be emailed with the PDF survey
  - Please also reach out to our support desk with questions



# Topics for Today's Webinar

- Final Phase I reminders
- Upcoming Phase II deadlines
- Completing the Phase III Contracting Survey
- Highlighting OneCity Health's Expansion of Asthma Home-Based Self-Management Program

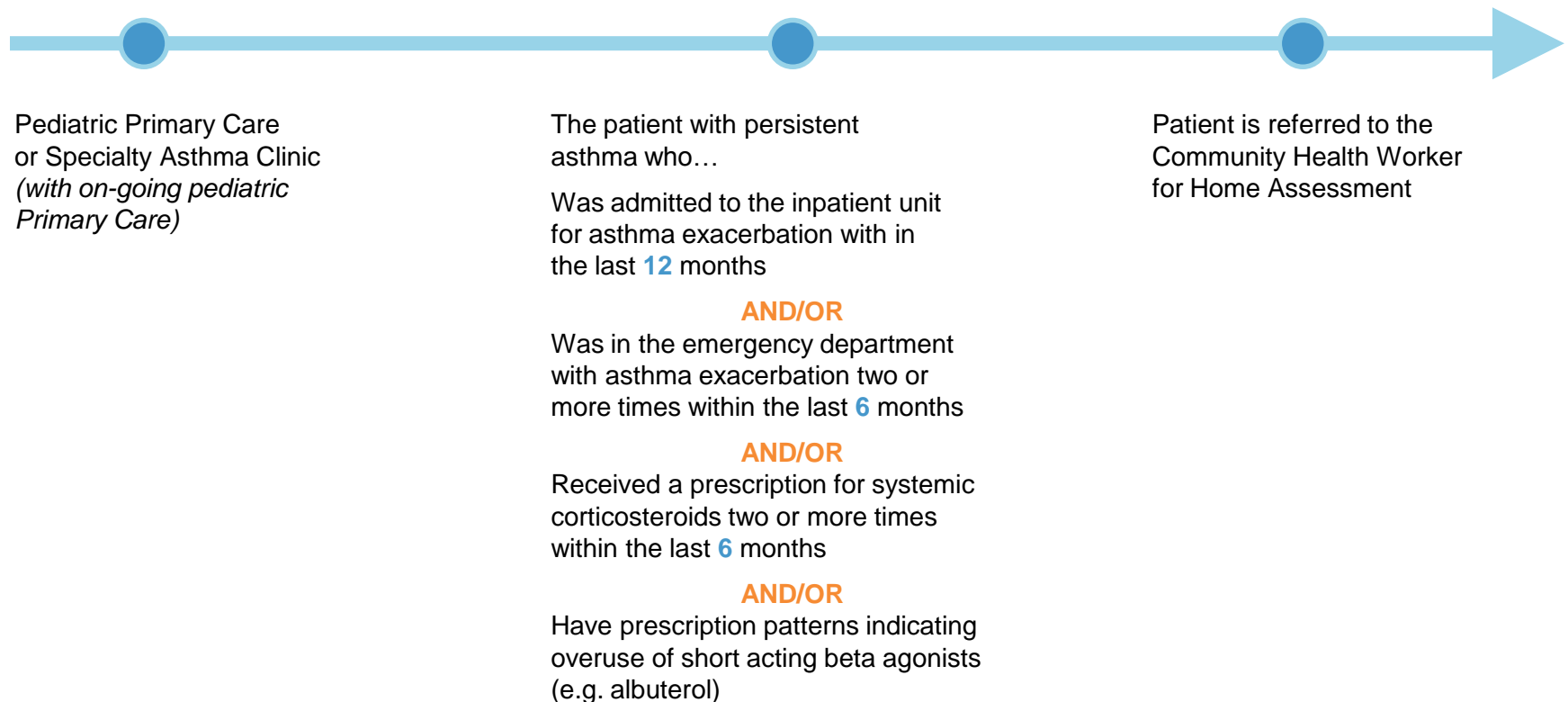
# Overview of the Expansion of Asthma Home-Based Self-Management Program

- Our home-based services address home environmental trigger management, self-monitoring, medication use, medical follow-up, and coordination with social services
- Currently, the OneCity Health Expansion of Home-Based Environmental Asthma Management project (3.d.ii) is active with the Pediatric Primary Care and Asthma Specialty Clinics
- We are currently contracted with:
  - OneCity Health PPS Partners in Manhattan, Brooklyn, Queens and the Bronx
  - Community Health Worker organizations
  - Department of Health and Mental Hygiene for Integrated Pest Management



# Expansion of Asthma Home-Based Self-Management Program

## Who Gets Referred And From What Setting?



# Expansion of Asthma Home-Based Self-Management Program



## PRIMARY CARE TEAM

Refers patient to Community Health Worker using the Asthma Action Plan

- Reviews and updates **clinical treatment recommendations**
- Provides asthma education and home environmental screening in the **primary care setting**
- Identifies patients with frequent or severe asthma exacerbation
- **Refers patients** with frequent or severe asthma exacerbations to CHW services
- Develops and documents an **Asthma Action Plan**



## COMMUNITY HEALTH WORKERS (CHWS)

Trained personnel with understanding of Asthma who will provide home visits. Refers patients for IPM services

- Conducts an **in-home environmental assessment**
- **Supports the patient** in following the clinical team's recommendations, including:
  - Self-monitoring,
  - Medication Adherence, and
  - Follow-up
- Links the patient to **home remediation** services to address allergens in the home



## HOME REMEDIATION SERVICES

Removes sources of allergens from the home such as mold and vermin

- Conducts a secondary **in-home environmental assessment** to identify remediation areas
- **Performs Home Remediation through Integrated Pest Management** to address:
  - Pests
  - Vermin
  - Mold

**“Community partners and  
community health workers are  
essential to engaging patients.”**

- Janise Germosen,  
LMSW, Community Health Worker Supervisor and  
Social Work Care Manager at Asian Community Care  
Management, a OneCity Health community partner



# Expansion of Asthma Home-Based Self-Management Program Management/Quality Control

COMMUNITY  
HEALTH WORKER

ASTHMA  
LEARNING  
COLLABORATIVE



**Scenario 1 (CHW)**  
Pre, During Visit Planning



**Scenario 2 (CHW)**  
Post Visit Planning



**Scenario 3 (CHW)**  
Asthma Action Plan  
Education/Mock  
Home Assessment



**Scenario 4  
(CHW/Supervisor)**  
Asthma Action Plan "Red  
Zone" – Acute Exacerbation



**Scenario 5 (Supervisor)**  
Root Cause Analysis



**Scenario 6 (CHW)**  
Case Conference



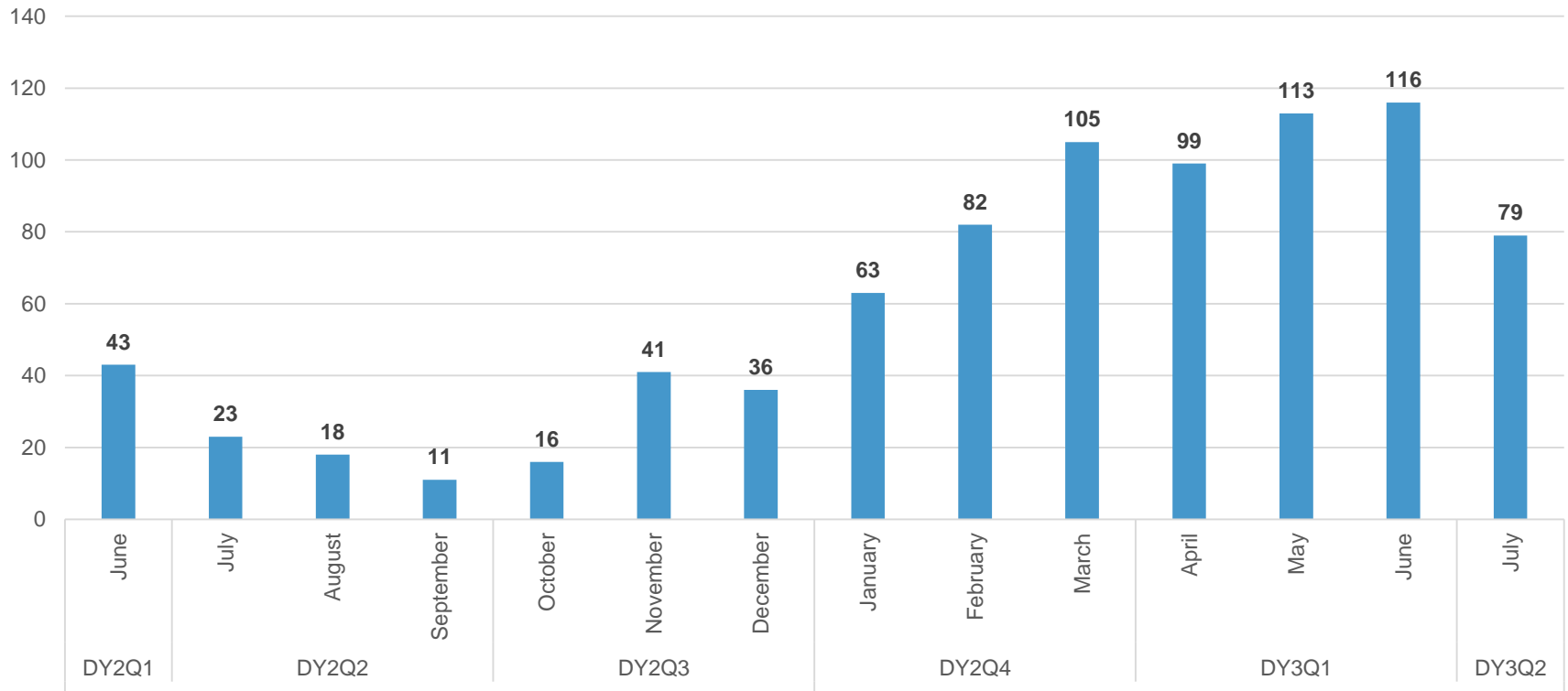
# Expansion of Asthma Home-Based Self-Management Implementation / “Go-Live”

Clinical Referring Site	Community Health Worker Organization	Go-Live Month	Go-Live Year
NYC Health + Hospitals/Lincoln	Asthma Intervention and Relief Network, Inc.	June	2016
NYC Health + Hospitals/Kings County Urban Health Plan Inc.	CABS Home Attendants Service, Inc. Make the Road New York	January	2017
NYC Health + Hospitals/Queens Gentle Touch Medical, PC	Asian Community Care Management Asian Community Care Management	January	2017
NYC Health + Hospitals/Gotham Health, East New York	CABS Home Attendants Service, Inc.	January	2017
NYC Health + Hospitals/Gotham Health, Gouverneur	Asthma Intervention and Relief Network, Inc.	February	2017
NYC Health + Hospitals/Elmhurst	St. Mary's Healthcare System for Children Inc.	February	2017
NYC Health + Hospitals/Harlem	Asthma Intervention and Relief Network, Inc.	February	2017
East Harlem Council for Human Services, Inc /Boriken Neighborhood Health Center	LSA Family Health Service, Inc.	March	2017
NYC Health + Hospitals/Woodhull	Make the Road New York	March	2017
NYC Health + Hospitals/Gotham Health, Belvis	Asthma Intervention and Relief Network, Inc.	March	2017
NYC Health + Hospitals/Gotham Health, Morrisania Sheldon Lippman, Physician P.C.	Asthma Intervention and Relief Network, Inc. CABS Home Attendants Service, Inc.	March	2017
NYC Health + Hospitals/Gotham Health, Cumberland	CABS Home Attendants Service, Inc.	April	2017
NYC Health + Hospitals/Jacobi	Village Care of NY	May	2017
NYC Health + Hospitals/North Central Bronx	Village Care of NY	May	2017
NYC Health + Hospitals/Bellevue	Asian Community Care Management	May	2017
Community Healthcare Network - Manhattan	Asthma Intervention and Relief Network, Inc.	May	2017
NYC Health + Hospitals/Metropolitan	LSA Family Health Service, Inc.	May	2017
NYC Health + Hospitals/Gotham Health, Sydenham	Asthma Intervention and Relief Network, Inc.	June	2017
SUNY Downstate Medical Center	Asian Community Care Management	July	2017
Center for Comprehensive Health Practice	The New York Foundling	-	2017
NYC Health + Hospitals/Coney Island	St. Mary's Healthcare System for Children Inc.	-	2017
REST Medical Care, PC - Queens	The New York Foundling	-	2017
REST Medical Care, PC - Manhattan	The New York Foundling	-	2017
Community Healthcare Network - Long Island City	The New York Foundling	-	2017

# Expansion of Asthma Home-Based Self-Management Program Management/Quality Control

## Expansion of Home Based Asthma Self Management Program Enrollment DY2Q2-DY3Q2\*

(Enrolled, Assigned, Inactive Status Only - All PPS Partners)  
N=845

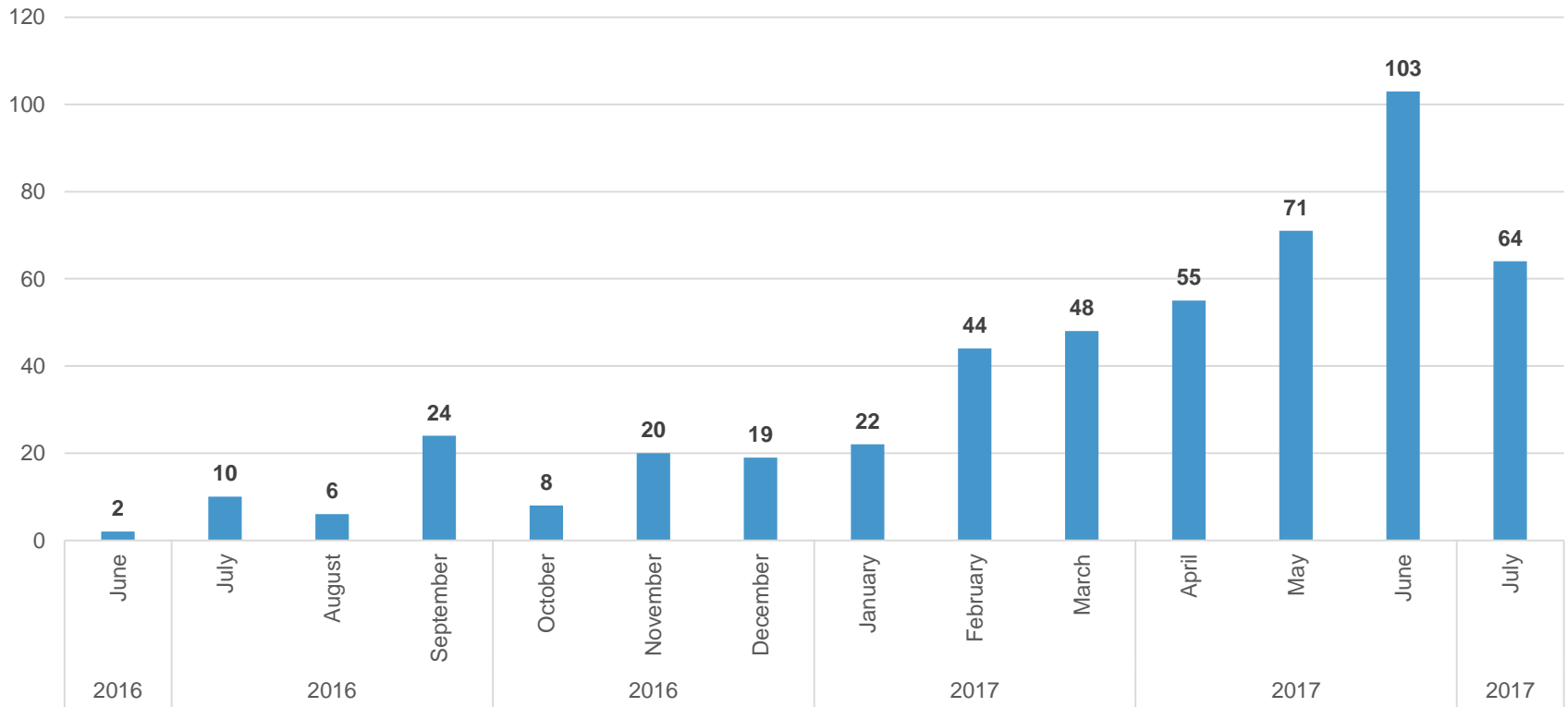


# Expansion of Asthma Home-Based Self-Management Program Management/Quality Control

## Expansion of Home Based Asthma Self Management Home Assessment DY2Q2-DY3Q2\*

(Enrolled, Assigned, Inactive Status Only - All PPS Partners)

N=496 (All Home Visits)



# Community Health Worker Success Stories

Child's mattress was being chewed up by a severe rodent infestation. **Was resolved by referral to IPM services.**

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Patient was resistant to medication due to fear of dependence. **CHW was able to counsel on importance of medication outside of the medical setting in the patient's home.** Patient is now regularly taking medication.

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Able to address heating issue in the apartment with the landlord after multiple inquiries from tenant. **IPM referral was also made to seal windows, address mold and degrease stove.** Patient has not been to the Emergency Room in two months.

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Child was unable to bathe due to a three-week-old clogged drain. After multiple failed inquiries by the tenant, **CHW was able to contact landlord to remediate.**

# Expansion of Home Based Asthma Self Management Upcoming Initiatives

## Community Health Worker Supervisor PDSA/Quality Improvement Overview

Delivery Date: **August 2<sup>nd</sup>**

## Asthma Action Plan: OneCity Health PPS Webinar

Delivery Date: **August 15th**

## Community Health Worker Adolescent Privacy “Train-The-Trainer”

Delivery Date: **September 13th**

## Community Health Worker Supervisor/Clinical Partner Monthly Check-in

Delivery Date: **TBD**

## Physician Asthma Care Education (PACE) “Train-The-Trainer”

Delivery Date: **TBD**



# Topics for Today's Webinar

- Final Phase I reminders
- Upcoming Phase II deadlines
- Completing the Phase III Contracting Survey
- Highlighting OneCity Health's Expansion of Asthma Home-Based Self-Management Program
- Final reminders

# Upcoming Opportunities

## Closed Loop Referral System

Following an RFP process, we have selected NowPow as our vendor for the Closed Loop Referral System, which will enable health care providers to refer patients to community-based organizations and social service agencies to meet their social support needs

We anticipate trainings on this system to begin in October. More details to come soon!

## Organizational Assessment of Value-Based Payment (VBP) Capacity

Community Service Society, our community-based organization (CBO) technical assistance partner, will soon begin reaching out certain partners to set up time to complete an organizational assessment of VBP capacity

If you have questions at any point about this initiative, please don't hesitate to call our support desk





## Final Reminders and Next Steps

- **August 15, 2017:** OneCity Health Asthma Action Plan Webinar. Details to join are on our website
- **August 22, 2017:** Office Hours for the Phase III Contracting Survey. Details to join are on our website
- **Due August 31, 2017:** PM016 (NPI Survey) and PM029 (Phase III Contracting Survey) – all partners are required to complete these
- **September 12, 2017:** Our next OneCity Health Partner Webinar. Details are on our website Events Calendar
- **September 13, 2017:** Our next City-Wide Project Advisory Committee (PAC) meeting, which will be in the Bronx. More details to come soon
- **Due September 29, 2017:** 5 Process Metrics; partners are only required to complete the metrics in their Comprehensive Schedule B. All partners are required to complete the financial health assessment
- **September 30, 2017:** The FINAL day to invoice for Phase I metrics

**If you have questions about completing metrics or submitting reports,  
please contact our support desk**

### Stay up to date and informed!

1. Make sure your contact information is up to date
2. Check the OneCity Health website regularly
3. Read the OneCity Health newsletter for important announcements



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