Executive Committee Meeting

Meeting Summary
October 5, 2018
199 Water Street, 31st Floor- West Board Room, New York, NY
2:00 PM – 3:00 PM

In Attendance (in-person or by phone):
- Carmina Bernardo (Planned Parenthood of New York City)
- Donna Colonna (Services for the Underserved)
- David Gross (Community Healthcare Network)
- Ellen Josem (Jewish Board of Family and Children’s Services)
- Maureen McClusky (NYC Health + Hospitals)
- Israel Rocha (NYC Health + Hospitals, OneCity Health CEO)
- Theresa Riodan (Healthfirst)
- William Walsh (University Hospital of Brooklyn, SUNY Downstate Medical Center)
- OneCity Health Business Operations & IT Committee members
  - Richard Keller (All Metro)
  - John Ulberg (NYC Health + Hospitals)
- OneCity Health (Committee Support)
  - Nicole Jordan-Martin, Executive Director, Implementation/Hub Executive Director
  - Tatyana Seta, Chief Financial Officer
  - Grace Wong, Acting Chief Operating Officer/Chief Network Officer
  - Wilbur Yen, Chief of Staff

Regrets:
- Claudia Calhoon (New York Immigration Coalition)
- Margaret Davino (Fox Rothschild, LLP)
- William Foley (NYC Health + Hospitals)
- Kevin Lynch (NYC Health + Hospitals)
- Joseph Masci (NYC Health + Hospitals)
- Randye Retkin (New York Legal Assistance Group)
- Paul Vitale (Brightpoint Health)

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<th>Item</th>
<th>Notes</th>
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<td>1. Welcome</td>
<td>Israel Rocha, OneCity Health CEO, called the meeting to order</td>
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<td>2. Old Business</td>
<td>Meeting minutes from July 19, 2018 were approved</td>
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<td>3. New Business</td>
<td>DY3 Financial Update provided by Tatyana Seta</td>
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<td>Ms. Seta presented the OneCity Health Performing Provider System (PPS)</td>
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<td>Budget Variance Analysis Fiscal Year-to-Date Report, DSRIP Revenue</td>
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<td>Analysis, and Cumulative Partner Payments and noted the following</td>
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<td>o Sharp increase in cumulative quarterly partner payments between</td>
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<td>Q3 and Q4 in FY18 is tied to revenue loss payment associated with</td>
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<td>hospital partners</td>
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<td>o Payments are reflective of timing outlined in contractual</td>
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<td>arrangements</td>
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<td>OneCity Health PPS Performance presented by Israel Rocha</td>
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<td>DSRIP is shifting from reporting to performance-based payments</td>
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<td>o In MY5, 85% of payment will be based on performance</td>
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Internally, OneCity Health is undergoing an organizational restructuring to ensure that teams are reconfigured for focus on remaining high-value metrics.

- A review of OneCity Health’s MY3 performance revealed that the PPS succeeded in achieving 48% of improvement targets for 33 claims-based metrics, ranking 3rd in metrics achieved among downstate peers.
- Using the Phase IV contracting and hospital-community partnership vehicle, OneCity Health will continue to focus efforts on the biggest opportunities for improvement with the bulk of funding including access, behavioral health, CAHPS measures, and utilization.

Phase IV Contracting presented by Nicole Jordan-Martin

- Guiding principles for Phase IV contracting included alignment with the New York State Roadmap for value-based payment.
  - Contracting methodology used in Phase IV contracting will also serve to identify partnership opportunities post-DSRIP.
  - Phase IV, 1st Amendment outlines standard participation requirements for single payment upon completion and approval of:
    - Compliance Attestation
    - Financial Assessment
    - Workforce Survey
  - Phase IV, 1st Amendment to be issued in November.

A motion was made:

- Resolution, that the OneCity Health Executive Committee approve a resolution on October 5, 2018, authorizing OneCity Health Services management to allocate an amount not-to-exceed $2M of Performing Provider System partner share of funds for Phase IV 1st Amendment Contracting.

Motion for Action Item i was approved with one abstention by the Executive Committee.

Hospital Community Partnership Update presented by Nicole Jordan-Martin

- Hospital-Community Partnerships are operationalized through the Hub Advisory Workgroups with memberships inclusive of current governance committees.
- Hub Advisory Workgroups meet bi-monthly to discuss and share best practices on challenges and opportunities to impact priority health outcomes.
- The workgroups provide a venue for identifying/engaging CBOs into this work through different partnership and funding opportunities.
- OneCity Health hopes that this collaborative model will create venue for strategic conversations and generate proof of concept that can be leveraged for post-DSRIP activities with managed care entities.
- Participants spoke about the challenges that inhibit collaboration between CBOs and MCOs in the current environment, and the importance of working toward organizational capability to report on encounter-based data.
- OneCity board members see an opportunity for the PPS to be a leader in convening these relationships/partnerships and disseminating lessons learned.

4. Adjournment

The meeting was adjourned.