



Dear Colleagues –

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Bonus Payments to CCB Participants

As you know, CCB's budget for DY2 includes funds that can be used for Bonus Payments to Participants. We are pleased to announce that the CCB Executive Committee recently approved the release of Internal PPS Bonus Payments to acknowledge Participants' contributions to CCB's success in meeting DSRIP milestones in DY1 (April 1, 2015 - March 31, 2016).

The factors taken into consideration in determining Participants' eligibility for Bonus Payments for activities conducted in DY1 were:

- Completion of the CCB Participant Survey prior to April 1, 2016
- Completion of the Workforce Survey prior to April 1, 2016.
- Whether DY1 Actively Engaged patient targets were met or exceeded (if applicable)
- A Participant's proportional contribution to the CCB's total DY1 Actively Engaged patients submission (if applicable).

All told, more than 200 Participant organizations will be receiving Bonus Payments. We are in the process of releasing Schedule B agreements to support the release of Bonus Payments to eligible Participants. The Schedule B agreements clearly articulate the activities for which your organization was eligible, which targets you met, and the associated funding amounts earned for each Bonus Payment activity. Please complete the Schedule B agreement, including banking information to support release of this Bonus Payment via electronic bank transfer. No other actions are required. If you have any questions with respect to the Schedule B for the Bonus Payment for DY1 activities, please contact Contracts@CCBrooklyn.org.

This particular round of Bonus Payments is dedicated to activities conducted in DY1 only. We recognize that additional, significant activities are currently underway at many Participants, and CCB's budget does provide for the release of additional Bonus Payments going forward. In keeping with the shift in the DSRIP program from a focus on reporting to more emphasis on performance, we anticipate that CCB Bonus Payments will also be focused less on activity targets and more on performance relative to DSRIP quality metrics. We appreciate all of the contributions that our partners have made to CCB thus far, and hope that your continued engagement will help us collectively meet the ambitious aims of the DSRIP program!

Updates to Mid-Point Assessment Timeline

The New York State Department of Health has adjusted the timeline for completion of the DSRIP Mid-Point Assessment. The primary changes pertain to the dates by which the initial Mid-Point Assessment recommendations will be released to the PPS and to the public for comment. The table below provides the original and new dates for key events of relevance to the Mid-Point Assessment. As part of the Mid-Point Assessment, the Independent Assessor (IA) will be conducting on-site reviews at all 25 PPS; the Maimonides PPS review is scheduled for Friday, October 21st.

Task	Original Schedule	Revised Schedule
Release Initial Mid-Point Assessment Report to PPS	November 3, 2016	November 10, 2016
Release Initial Mid-Point Assessment Report for Public Comment	November 10, 2016	November 17, 2016
PPS/Public Comment Period Ends	December 3, 2016	December 10, 2016
Release Final Mid-Point Assessment Report for Public Comment	December 23, 2016	December 23, 2016
2 nd Public Comment Period Ends	January 23, 2017	January 23, 2017
PAOP Convenes	January 31, 2017 – February 3, 2017	January 31, 2017 – February 3, 2017

Medical Records Review Underway for Measurement Year 2

There are certain DSRIP quality measures that can be assessed only via review of patient charts, such as ‘Controlling high blood pressure’ and ‘Screening for clinical depression.’ To assess performance relative to these measures, the New York State Department of Health (NYSDOH) is partnering with contractors to complete medical record reviews. MedReview, Inc. has been assigned by NYSDOH to complete the medical record review process for CCB for DSRIP Measurement Year 2, which ended on June 30, 2016.

On October 6th, we notified by email all practices that were identified for participation in medical record review (chart abstraction). CCB kindly requests that our DSRIP Participants be as cooperative and responsive as possible to requests from MedReview. Please do not hesitate to contact us if you have any questions or concerns regarding the medical record review process at support@CCBrooklyn.org or at (718) 355-9693.

Regulatory Waivers

As part of our initial DSRIP Project Plan application, CCB requested waivers of regulations to allow for efficient implementation of DSRIP projects and achievement of DSRIP goals. In March 2015 and January 2016, PPSs were awarded temporary waivers for a variety of regulations. Members from the Office of Primary Care and Health Systems Management (OPCHSM), Office of Mental Health (OMH), Office of Alcoholism and Substance Abuse Services (OASAS), and Office for People with Developmental Disabilities (OPWDD) were part of the review panel that evaluated the PPS’ requests. Over 280 regulatory waivers were approved in total.

The response to CCB’s waiver request can be found [here](#). Among others, it includes:

- Changes to the existing licensure thresholds pertaining to the integration of primary care/behavioral health/substance use services (Please see Attachment A, DSRIP 3.a.i Licensure Thresholds [here](#))
- Waiver of Certificate-of-need (CON) regulations (public need and financial feasibility only) for DSRIP-related projects
- Waiver of regulations prohibiting Article 28 providers from providing services off-site (Please note that reimbursement for these services is still prohibited)

The next step in this process is the submission of the Regulatory Waiver & Project Tracking Tool, in which we will identify the specific providers within CCB requiring the waivers for which we have been approved, as well as the providers who have/are submitting CON/Prior Approval Review (PAR) applications under DSRIP.

If you are pursuing a project that falls into the categories identified above and would like to be included in our submission, or if you have any questions, please contact Shari Suchoff at ssuchoff@maimonidesmed.org by Friday, October 21.

Value-Based Payment (VBP) Bootcamp - Session 3 Recap

The final VBP Bootcamp session for the New York City region (region 3) was held on Monday, September 12th at Bronx Community College. Attendees once again included a number of CCB Participants and staff from the Maimonides Central Services Organization. The VBP Bootcamp series is intended to ensure that the health plans, providers and community-based organizations have the information that they will need to support the successful transition to a value-based system of care delivery and payment. This particular session focused on performance management in VBP, including the how performance results will impact target budgets and the calculation of shared savings/losses, and provided demonstrations of the State’s analytic platforms to support VBP. Of note was the process and criteria by which the experts and key stakeholders comprising the Clinical Advisory Groups (CAGs) developed the VBP arrangements and suggested quality metrics for use in those arrangements. Additionally, the Bootcamp described an approach that could be used

for adjusting the target budgets in VBP arrangements to account for provider efficiency and performance. Lastly, DOH presented the Medicaid performance data that is available in the VBP Dashboards that are currently available for VBP Contractors participating in the VBP Pilots, with the goal of expanding to Managed Care Organizations and potential VBP Contractors by the end of this calendar year. For more information or to view webinars or presentations from all three of the VBP Bootcamp sessions, [click here](#) to visit the NYSDOH VBP Bootcamp website.

Results of CCB Network Opening

As noted in a previous CCB newsletter, the NYSDOH opened the PPS networks between August 8th and September 8th 2016 for additions (but not removals). During the network update period, CCB added more than 1,300 lines to its PPS network. Network updates for CCB included the addition of:

- 4 Community Based Organizations (CBOs)
- 2 Federally Qualified Health Centers (FQHCs)
- 4 behavioral health organizations
- 4 home health organizations
- 25 community-based primary and behavioral care practices

These network additions will not have an impact on CCB funding amounts, but they will help CCB to reach DSRIP performance targets, while strengthening our ability to function as an effective integrated delivery system moving forward.

Talent Needed - Join the Maimonides CSO Team!

We are looking to fill a number of positions in the Maimonides Central Services Organization. Open positions and requirements are listed on CCB's website [here](#). Qualified candidates should submit a cover letter along with their resume via email to CSOtalent@maimonidesmed.org. Current opportunities include:

- Administrator, Participant Database (Salesforce)
- Manager, Network Support
- Senior Analyst, Population Health
- Director, CSO Project Management
- Associate, Network Support
- Director, Provider Engagement
- DSRIP Controller / Deputy Finance Officer
- Director, DSRIP Communications



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