



Mid-Point Assessment Action Plan Final Update

In February 2017, the Independent Assessor (IA) presented its Mid-Point Assessment recommendations to the Project Approval and Oversight Panel (PAOP). Following PAOP's review, the IA released the final Mid-Point Assessment recommendations to the PPS who were required to develop Mid-Point Assessment Action Plans to address the items identified in the recommendations. The PPS were required to submit the Action Plans for IA review and approval with updates on the PPS progress towards completing the Action Plans as part of the DY3, Q1 and DY3, Q2 PPS Quarterly Reports. Through the Action Plans, the PPS were asked to demonstrate a plan for addressing the recommendations, the process the PPS would implement to correct the area of concern, and the timeline for completion of all tasks. All Action Plan activities were required to be completed by no later than the end of DY3, Q2 (September 30, 2017).

The following is a summary of the results of PPS efforts on the Mid-Point Assessment Action Plans following the close of DY3, Q2.

Funds Flow and Partner Engagement

The most common recommendation made during the Mid-Point Assessment was for PPS to address concerns related to their Funds Flow and Partner Engagement activities, with 14 of the 25 PPS receiving the PAOP Standard Modification. The PAOP Standard Modification called for PPS to,

- develop a detailed plan for engaging partners across all projects with specific focus on Primary Care, Mental Health, Substance Used Disorder providers as well as Community Based Organizations (CBOs). The Plan must outline a detailed timeline for meaningful engagement.
- describe how the PPS will flow funds to partners so as to ensure success in DSRIp.

As Table 1 below illustrates, \$414M in funds had been distributed at the time the Mid-Point Assessment was conducted (DY2, Q2). In the four quarters following the completion of the Mid-Point Assessment, PPS increased their distributions to partners by over \$685M to a total of \$1.1B in funds distributed to PPS partners, an increase of over 165%. Further, the PPS responded to the specific feedback related to distributing more funds outside of the hospital and PPS PMO categories and increased distributions to partners outside of the hospital and PMO by \$231M or 204% over this same period.



Table 1: PPS Funds Flow Distributions as of DY2, Q2 and DY3, Q2

Partner Category	As of MPA (DY2, Q2)		As of DY3, Q2		Change since MPA	
	Funds Distributed	% of Funds Distributed	Funds Distributed	% of Funds Distributed	Additional Funds Distributed	Increase in Funds Distributed
Practitioner - Primary Care Provider (PCP)	\$ 14,659,935	3.54%	\$ 63,754,315	5.80%	\$ 49,094,381	334.89%
Practitioner - Non-Primary Care Provider (PCP)	\$ 2,654,701	0.64%	\$ 6,223,342	0.57%	\$ 3,568,641	134.43%
Hospital	\$ 121,775,967	29.40%	\$ 182,521,398	16.59%	\$ 60,745,431	49.88%
Hospital - IP/ED	\$ -	0.00%	\$ 147,358,192	13.40%	\$ 147,358,192	100.00%
Hospital - Ambulatory	\$ -	0.00%	\$ 29,612,421	2.69%	\$ 29,612,421	100.00%
Clinic	\$ 29,687,182	7.17%	\$ 87,904,817	7.99%	\$ 58,217,635	196.10%
Case Management / Health Home	\$ 5,973,274	1.44%	\$ 17,408,904	1.58%	\$ 11,435,631	191.45%
Case Management	\$ -	0.00%	\$ 4,670,951	0.42%	\$ 4,670,951	100.00%
Health Home	\$ -	0.00%	\$ 3,255,815	0.30%	\$ 3,255,815	100.00%
Mental Health	\$ 9,741,485	2.35%	\$ 35,291,921	3.21%	\$ 25,550,436	262.28%
Substance Abuse	\$ 4,319,963	1.04%	\$ 12,780,469	1.16%	\$ 8,460,506	195.85%
Nursing Home	\$ 5,476,856	1.32%	\$ 18,177,581	1.65%	\$ 12,700,725	231.90%
Pharmacy	\$ 305,708	0.07%	\$ 1,461,616	0.13%	\$ 1,155,908	378.11%
Hospice	\$ 739,659	0.18%	\$ 3,279,031	0.30%	\$ 2,539,372	343.32%
Community Based Organizations	\$ 11,993,454	2.90%	\$ 33,990,664	3.09%	\$ 21,997,210	183.41%
All Other	\$ 23,297,909	5.62%	\$ 39,802,885	3.62%	\$ 16,504,976	70.84%
Uncategorized	\$ 2,356,252	0.57%	\$ 7,566,139	0.69%	\$ 5,209,887	221.11%
Non-PPS Network	\$ 2,201,865	0.53%	\$ 5,520,555	0.50%	\$ 3,318,691	150.72%
PPS PMO	\$ 179,083,029	43.23%	\$ 395,752,021	35.98%	\$ 216,668,992	120.99%
Home Care	\$ -	0.00%	\$ 2,503,255	0.23%	\$ 2,503,255	100.00%
County Agency	\$ -	0.00%	\$ 116,200	0.01%	\$ 116,200	100.00%
CBO Tier 3	\$ -	0.00%	\$ 92,696	0.01%	\$ 92,696	100.00%
Other	\$ -	0.00%	\$ 1,002,427	0.09%	\$ 1,002,427	100.00%
Total Non-Hospital and Non-PMO Distributions	\$ 113,408,240	27.38%	\$ 344,803,581	31.34%	\$ 231,395,341	204.04%
Total Funds Distributed - All Partners	\$ 414,267,236		\$ 1,100,047,613		\$ 685,780,376	165.54%

For the 14 PPS that received the PAOP Standard Modification, Table 2 illustrates similar trends in the distribution of funds to PPS partners. At the time of the Mid-Point Assessment, PPS had distributed \$264M to PPS partners. At the end of DY3, Q2, that figure increased to \$699M, an increase of over \$434M or 164%. PPS distributions to non-hospital and non-PPS PMO partners also saw a significant increase from \$71M at the time of the Mid-Point Assessment to \$210M at the end of DY3, Q2.

Table 2: PPS Funds Flow Distributions as of DY2, Q2 and DY3, Q2 (PAOP Standard Modification Only)

Partner Category	As of MPA (DY2, Q2)		As of DY3, Q2		Change since MPA	
	Funds Distributed	% of Funds Distributed	Funds Distributed	% of Funds Distributed	Additional Funds Distributed	Increase in Funds Distributed
Practitioner - Primary Care Provider (PCP)	\$ 11,703,793	4.42%	\$ 51,322,092	7.34%	\$ 39,618,299	338.51%
Practitioner - Non-Primary Care Provider (PCP)	\$ 2,136,190	0.81%	\$ 5,576,547	0.80%	\$ 3,440,357	161.05%
Hospital	\$ 72,126,205	27.24%	\$ 100,475,721	14.36%	\$ 28,349,516	39.31%
Hospital - IP/ED	\$ -	0.00%	\$ 117,828,496	16.84%	\$ 117,828,496	100.00%
Hospital - Ambulatory	\$ -	0.00%	\$ 15,982,839	2.28%	\$ 15,982,839	100.00%
Clinic	\$ 17,886,239	6.76%	\$ 49,520,263	7.08%	\$ 31,634,025	176.86%
Case Management / Health Home	\$ 3,462,626	1.31%	\$ 7,214,609	1.03%	\$ 3,751,982	108.36%
Case Management	\$ -	0.00%	\$ 1,966,990	0.28%	\$ 1,966,990	100.00%
Health Home	\$ -	0.00%	\$ 1,145,040	0.16%	\$ 1,145,040	100.00%
Mental Health	\$ 6,735,971	2.54%	\$ 25,234,622	3.61%	\$ 18,498,651	274.62%
Substance Abuse	\$ 2,669,425	1.01%	\$ 8,255,026	1.18%	\$ 5,585,601	209.24%
Nursing Home	\$ 1,233,657	0.47%	\$ 6,340,459	0.91%	\$ 5,106,802	413.96%
Pharmacy	\$ 277,797	0.10%	\$ 1,214,378	0.17%	\$ 936,581	337.15%
Hospice	\$ 563,842	0.21%	\$ 1,395,542	0.20%	\$ 831,700	147.51%
Community Based Organizations	\$ 4,283,943	1.62%	\$ 13,638,510	1.95%	\$ 9,354,567	218.36%
All Other	\$ 18,748,126	7.08%	\$ 28,934,675	4.14%	\$ 10,186,548	54.33%
Uncategorized	\$ 1,259,757	0.48%	\$ 4,054,421	0.58%	\$ 2,794,664	221.84%
Non-PPS Network	\$ 598,467	0.23%	\$ 2,468,289	0.35%	\$ 1,869,822	312.44%
PPS PMO	\$ 121,068,638	45.73%	\$ 254,734,060	36.41%	\$ 133,665,422	110.40%
Home Care	\$ -	0.00%	\$ 1,311,535	0.19%	\$ 1,311,535	100.00%
County Agency	\$ -	0.00%	\$ 37,410	0.01%	\$ 37,410	100.00%
Other	\$ -	0.00%	\$ 952,966	0.14%	\$ 952,966	100.00%
Total Non-Hospital and Non-PMO Distributions	\$ 71,559,831	27.03%	\$ 210,583,372	30.10%	\$ 139,023,541	194.28%
Total Funds Distributed - All Partners	\$ 264,754,674		\$ 699,604,489		\$ 434,849,814	164.25%



PPS Partner Engagement efforts followed a similar path as that reflected in the PPS Funds Flow distributions following the Mid-Point Assessment. Table 3 below highlights the overall increase in partners engaged from 266,425 at the Mid-Point Assessment to 552,277 as of DY3, Q2. This increase of 285,852 partners was driven by significant increases in the number of Primary Care and Non-Primary Care practitioners as well as the number of Mental Health partners.

Table 3: PPS Partner Engagement as of DY2, Q2 and DY3, Q2¹

Partner Type	Committed (in DSRIP Project Plan Application)	As of MPA (DY2, Q2)		As of DY3, Q2		Change since MPA	
		Partners Engaged	% of Committed Partners Engaged	Partners Engaged	% of Committed Partners Engaged	Additional Partners Engaged	% increase in Partners Engaged
Practitioner - Primary Care	58,599	44,912	77%	90,572	155%	45,660	102%
Practitioner - Non-Primary Care	113,253	111,924	99%	264,725	234%	152,801	137%
Hospital	268	788	294%	1,180	440%	392	50%
Clinic	1,823	2,095	115%	3,231	177%	1,136	54%
Case Management / Health Home	1,346	1,402	104%	2,265	168%	863	62%
Mental Health	10,365	10,841	105%	26,273	253%	15,432	142%
Substance Abuse	1,395	1,312	94%	1,979	142%	667	51%
Nursing Home	887	1,448	163%	1,429	161%	(19)	-1%
Pharmacy	1,004	452	45%	809	81%	357	79%
Hospice	99	222	224%	243	245%	21	9%
Community Based Organizations	2,876	2,592	90%	3,422	119%	830	32%
All Other	75,371	88,437	117%	156,149	207%	67,712	77%
TOTAL - All Partners	267,286	266,425	99.68%	552,277	207%	285,852	

For the 14 PPS that received the PAOP Standard Modification, there was a similar improvement in the engagement of partners in the four quarters following the Mid-Point Assessment. Overall Partner Engagement increased from 185,682 to 344,907; an increase of 159,225 partners engaged. Like the overall Partner Engagement efforts, these PPS saw significant increases in the number of Primary Care and Non-Primary Care practitioners and in the number of Mental Health partners.

In reviewing the data for the 14 PPS that received the PAOP Standard Modification it should be noted that one of the PPS, Advocate Community Partners (ACP), experienced reductions to the number of partners engaged following the Mid-Point Assessment. As a result of these reductions, the data in Table 4 below shows a smaller increase and in some cases, like Community Based Organizations, a reduction in the number of partners engaged by these PPS. The data in Table 5 represents the partner engagement data for the 13 PPS that received the PAOP Standard Modification with ACP excluded from the analysis.

When the IA explored these reductions further with ACP, it was determined that the previously reported figures included partners with which ACP did not have a formal agreement but rather only a Memorandum of Understanding (MOU), which does not constitute engagement of the partner. The figures reflected in the DY3, Q2 PPS Quarterly Report therefore represent a more accurate reporting of the number of partners engaged by ACP.

¹ The counts of engaged partners does not represent an unduplicated count of partners. PPS may engage a single partner across multiple projects resulting in that partner being counted for each project in which it has been engaged. A single partner may also be engaged across multiple PPS.



Table 4: PPS Partner Engagement as of DY2, Q2 and DY3, Q2 (PAOP Standard Modification Only)²

Partner Type	Committed (in DSRIP Project Plan Application)	As of MPA (DY2, Q2)		As of DY3, Q2		Change since MPA	
		Partners Engaged	% of Committed Partners Engaged	Partners Engaged	% of Committed Partners Engaged	Additional Partners Engaged	% increase in Partners Engaged
Practitioner - Primary Care	40,565	31,101	77%	58,565	144%	27,464	88%
Practitioner - Non-Primary Care	80,622	81,387	101%	168,053	208%	86,666	106%
Hospital	164	557	340%	780	476%	223	40%
Clinic	1,112	1,278	115%	1,785	161%	507	40%
Case Management / Health Home	799	809	101%	1,218	152%	409	51%
Mental Health	6,853	7,713	113%	18,648	272%	10,935	142%
Substance Abuse	911	814	89%	1,115	122%	301	37%
Nursing Home	494	1,036	210%	911	184%	(125)	-12%
Pharmacy	874	269	31%	417	48%	148	55%
Hospice	57	161	282%	176	309%	15	9%
Community Based Organizations	1,873	997	53%	770	41%	(227)	-23%
All Other	52,186	59,560	114%	92,469	177%	32,909	55%
TOTAL - All Partners	186,510	185,682	99.56%	344,907	185%	159,225	

Table 5: PPS Partner Engagement as of DY2, Q2 and DY3, Q2 (PAOP Standard Modification Only, excluding ACP)³

Partner Type	Committed (in DSRIP Project Plan Application)	As of MPA (DY2, Q2)		As of DY3, Q2		Change since MPA	
		Partners Engaged	% of Committed Partners Engaged	Partners Engaged	% of Committed Partners Engaged	Additional Partners Engaged	% increase in Partners Engaged
Practitioner - Primary Care	35,383	23,613	67%	52,118	147%	28,505	121%
Practitioner - Non-Primary Care	74,035	70,819	96%	160,220	216%	89,401	126%
Hospital	150	469	313%	750	500%	281	60%
Clinic	998	1,046	105%	1,659	166%	613	59%
Case Management / Health Home	751	649	86%	1,152	153%	503	78%
Mental Health	6,238	6,145	99%	16,488	264%	10,343	168%
Substance Abuse	751	462	62%	917	122%	455	98%
Nursing Home	467	692	148%	811	174%	119	17%
Pharmacy	849	141	17%	297	35%	156	111%
Hospice	54	113	209%	158	293%	45	40%
Community Based Organizations	1,768	469	27%	651	37%	182	39%
All Other	42,757	43,240	101%	87,597	205%	44,357	103%
TOTAL - All Partners	164,201	147,858	90.05%	322,818	197%	174,960	

Project Specific Recommendations

In addition to the recommendations related to Funds Flow and Partner Engagement, 16 of the PPS received at least one recommendation related to their efforts to implement specific projects. These recommendations were made based on the progress demonstrated through the PPS Quarterly Reports towards meeting the specific commitment dates for the completion of project milestones.

As of the DY3, Q2 PPS Quarterly Reports, PPS had successfully completed over 95% of all project milestones that were scheduled for completion by this point of the DSRIP Program. PPS Quarterly

² The counts of engaged partners do not represent an unduplicated count of partners. PPS may engage a single partner across multiple projects resulting in that partner being counted for each project in which it has been engaged. A single partner may also be engaged across multiple PPS.

³ The counts of engaged partners do not represent an unduplicated count of partners. PPS may engage a single partner across multiple projects resulting in that partner being counted for each project in which it has been engaged. A single partner may also be engaged across multiple PPS.



**Department
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Medicaid
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Reports indicate that PPS continue on a path for the successful implementation of a similar percentage of the remaining project implementation requirements due through the end of DY4, Q4, pending validation by the IA.