Introduction to the PPS Primary Care Plan

December 11th All-PPS Meeting
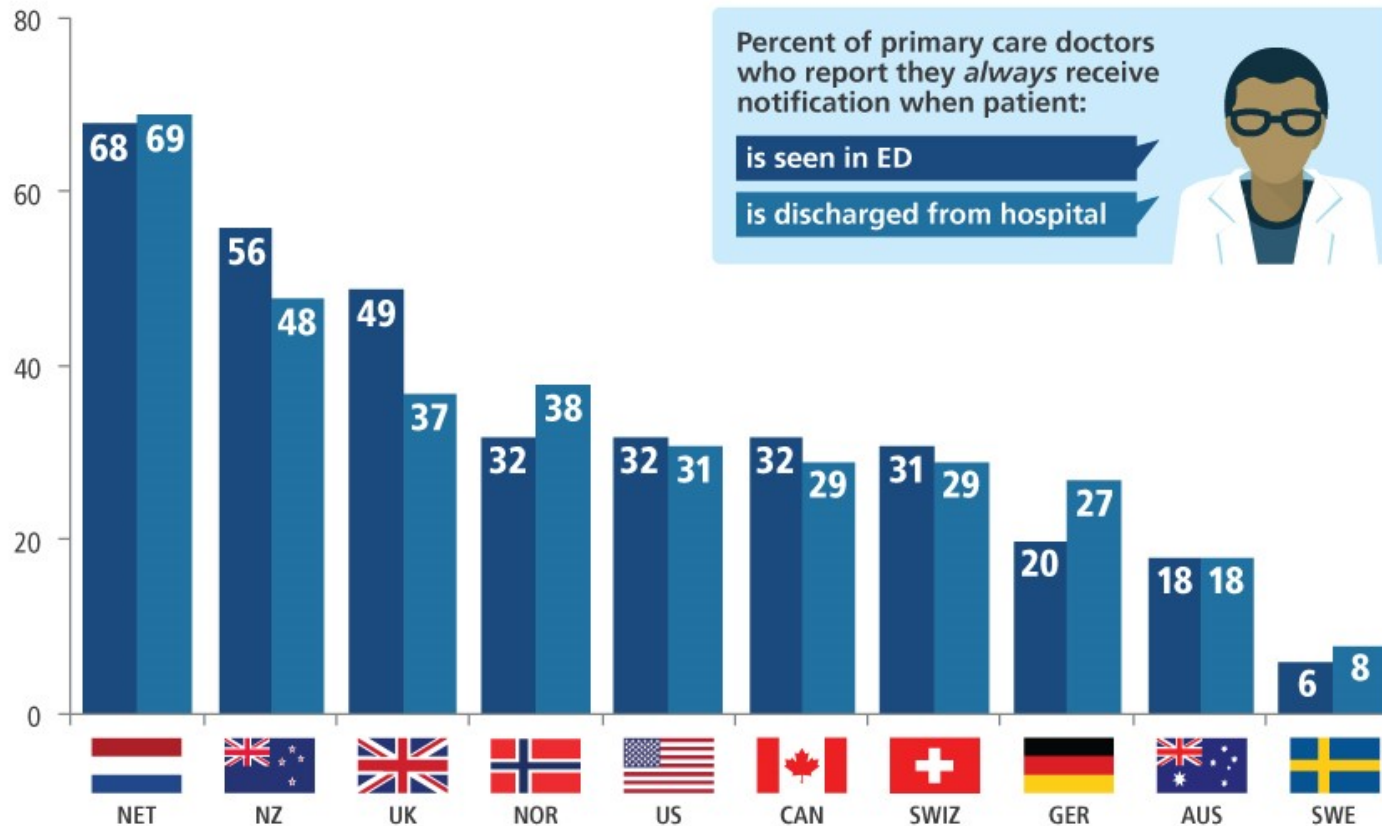
December 2015

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All Nations Face Challenges Coordinating Care

Doctors in every country in a 10-nation survey reported that their practices struggled to coordinate care and communicate with other health providers, which is key to managing patients with complex care needs.

Percent of primary care doctors who report they *always* receive notification when patient:

is seen in ED

is discharged from hospital

	NET	NZ	UK	NOR	US	CAN	SWIZ	GER	AUS	SWE
is seen in ED	68	56	49	32	32	32	31	20	18	6
is discharged from hospital	69	48	37	38	31	29	29	27	18	8

Source: 2015 Commonwealth Fund International Health Policy Survey of Primary Care Physicians.

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Primary Care in DSRIP

- PCPs play a critical role in the DSRIP Program's success. There are over 11,500 committed DSRIP PCPs

- Over $400 million of DSRIP funding is attributed to Domain 2 and 3 quality measures

- PPSs are collaborating with PCPs to expand access and capacity

Effectively engaging Primary Care will be critical to the success of many DSRIP initiatives

Background of the PPS Primary Care Plan

- During the February DSRIP Project Approval and Oversight Panel (PAOP) meeting, the panel voted to require each PPS to submit a Primary Care Plan
  - This was reinforced during the November PAOP meeting with the Upstate PPSs

- Review and feedback with PPSs and other stakeholder groups resulted in significant refinement of the PPS Primary Care Plan
  - *Stakeholder groups included:* 2 PPSs, HANYS, CHCANYS, GNYHA, UHF, the Primary Care Development Corporation (PCDC), Office of Mental Health (OMH), SHIP/APC workgroup, PAOP Primary Care Workgroup

- Thank you to those of you who participated and for your valuable feedback

Goals of the PPS Primary Care Plan

- The goal of the *PPS Primary Care Plan* is for PPSs to address the question:

  What is your over-arching DSRIP plan for Primary Care?

- The purpose of the *PPS Primary Care Plan* is to:
  - Assess current status of primary care in your network
  - Detail plans for reaching primary care milestones
  - Report on measures to assess progress towards achieving goals around access and capacity

- PPSs should have a concerted plan for overall development of primary care capacity and measure impact in expanding capacity and access to meet DSRIP goals

- Monitoring a set of consistent measures is important for properly assessing this capacity and engagement over time

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Fundamentals of the PPS Primary Care Plan

All PPS Primary Care Plans should include the following *six fundamentals*:

1. An assessment of current primary care capacity, performance and needs, and a plan for addressing those needs;

2. How Primary Care expansion and practice and workforce transformation will be supported with training and technical assistance;

3. How primary care will play a central role in an integrated delivery system;

4. How the PPS will enable Primary Care to participate effectively in value-based payments;

5. How PPS funds flow supports the PPS Primary Care strategies; and

6. How the PPS is progressing toward integrating Primary Care and Behavioral Health

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Components of the PPS Primary Care Plan

- Section 1: Narrative / Questions

- Section 2: Measures & Provider Network

- Section 3: Milestones & Access/Capacity Measures

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Summary of the PPS Primary Care Plan

This will help the PPSs address the "*fundamentals*" of a Primary Care Plan:

1. Assessment of capacity, performance, needs, and over arching plan
2. How Primary Care workforce transformation will be supported
3. Role of Primary Care in the IDS

4. How PPS will enable VBP for Primary Care
5. How PPS funds flow supports the PPS's Primary Care strategies
6. How the PPS is progressing toward integrating Primary Care and Behavioral Health

1. Narrative / Questions

Guiding questions that ask the PPS to provide a narrative around how they will be approaching Primary Care in DSRIP
- *Includes discussion of working with PCPs at the practice level, resources and support for PCMH/APC activities, and representation in PPS governance*

Combine existing data with PPS "Primary Care Plan Survey"

- Feedback suggested asking questions that help PPSs to describe how they are working with Primary Care in the PPS, including how Primary Care is engaged and involved in PPS governance
- Asks PPS to address the "6 fundamentals" of the PPS Primary Care Plan

2. Measures & Provider Network

CAHPS survey measures:
- *Getting Timely Appointments, Care and Information*
- *Helpful, Courteous, and Respectful Office Staff*
- *Primary Care length of relationship and usual source of care*

Understanding the PPS's Primary Care Provider network

- CAHPS measures are already collected for DSRIP, and will be imported
- PPS provider network data can support PPS understanding of and reporting on their PCP network
- DOH is exploring how PPS provider network data may be linked to databases like the Provider Network Data System (PNDS)

3. Milestones & Access/Capacity Measures

Data imported from Implementation Plan and Quarterly Reports:
- *Link to project milestone steps for requirements that target PCPs*
- *Progress in integrating behavioral health*
- *Link to relevant organizational components (e.g., Steps for VBP)*

- To reduce redundancy and reporting burden, information will be linked or imported from the Implementation Plan / Quarterly Report
- PPS will report on measures of access and capacity for sites with (or pursuing) PCMH/APC

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Formulating the Primary Care Plan - 1

The Independent Assessor (IA) is now generating PPS primary care profiles that are framed around the **Section 1 Narrative/Questions** (slides 12 & 13). Information from prior PPS materials will be related to the 6 primary care fundamentals and enable the IA to identify areas for additional data collection.

Data Sources Used for Information Gathering

- Project Implementation Plan
- Organizational Plan Application
- Community Needs Assessment

The IA will then use the PPS primary care profile to build a feedback tool termed the **"Primary Care Plan Survey"**.

Survey Used for Gathering Feedback

The IA will pre-populate the survey with the aforementioned data sources. Then, Phase 1 of the survey – feedback gathering – will allow each PPS to validate the baseline information is correct and provide further, foundational information to how it currently envisions primary care in DSRIP.

Formulating the Primary Care Plan - 2

Primary Care Plan Survey Uses

The Independent Assessor (IA) will use the survey to complete the PPS Primary Care Plan for each PPS. The survey will:

- Assess the current status of primary care in DSRIP
- Create documentation on PPS-specific plans to address primary care
- Identify baseline measures so that a PPS can demonstrate progress over time

Content of the PPS Primary Care Plan

Section 1: Narrative / Questions

- The PPS Primary Care Plan* should address each of the following "*fundamentals*":

1. **Assessment of current primary care capacity, performance and needs, and a plan for addressing those needs**
   - PPS's over-arching approach for expanding Primary Care capacity and ensuring the provision of required services (including, as appropriate, addressing gaps in Primary Care capacity)
   - How the PPS is working with community-based PCPs, as well as institution-based PCPs?

2. **How will primary care expansion and practice and workforce transformation be supported with training and technical assistance?**
   - What are your PPS plans for working with Primary Care at the practice level, and how are you supporting them to successfully achieve PCMH/APC?
   - Resources could include: collaboration, accreditation, incentives, training/staffing support, practice transformation support, central resources, vendors to support key activities, additional staffing resources, etc.
   - How is your PPS working to ensure that existing statewide resources for technical assistance are being leveraged appropriately?

* The PPS Primary Care Plan will be informed by PPS "Primary Care Profiles" (derived from Community Needs Assessments, Project Plan Applications, and Implementation Plans) and surveys, as needed.

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Section 1: Narrative / Questions

3. **What is the PPS strategy for how primary care will play a central role in an integrated delivery system?**

    - How will the PPS strengthen the continuum of Primary Care and ensure meaningful linkages to necessary secondary and tertiary services?

    - How is Primary Care represented in your PPS's governance committees and structure and clinical quality committees?

4. **What is the PPS strategy to enable primary care to participate effectively in value-based payments?**

    - How will key issues for shifting to VBP be managed? (e.g., technical assistance on contracting and data analysis, ensuring primary care providers receive necessary data from hospitals/EDs, creating transition plans, addressing workforce needs, and behavioral health integration)

5. **How does your PPS's funds flow support your Primary Care strategies?**

    - What resources are being expended by your PPS to support PCPs in DSRIP?

6. **How is the PPS progressing toward integrating Primary Care and Behavioral Health (building beyond what is reported for Project 3.a.i)?**

    - Including both collaborative care and the development of needed community-based providers

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Section 2: Measures & Provider Network

- **CAHPS measures that will be included are already collected for DSRIP:**
  - Getting Timely Appointments, Care and Information
  - Helpful, Courteous, and Respectful Office Staff
  - Primary Care length of relationship and usual source of care

- **Primary Care measures that are already being collected for DSRIP (through surveys and claims data) will be included in the Primary Care Plan**

- **Measuring Primary Care Impact through the workforce reporting**

- **The state has access to databases, including the Provider Network Data System (PNDS), that might be leveraged for understanding the PPS provider networks**
  - DOH is in the process of linking the PNDS data to PPS provider networks
  - DOH is examining PPS network data to help better understand PCP networks and project implementation planning

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Section 3: Milestones & Access / Capacity Measures

- **Relevant information will be linked or imported from the organizational section and from the PPS projects that have PCP-level requirements**
  - Link to project milestone steps for requirements that target PCPs
  - Progress in integrating behavioral health
  - Link to relevant organizational components

- **PPS will report on access/capacity for sites with (or pursuing) PCMH/APC**
  - Where possible, this will be informed by existing data sources (e.g., Community Needs Assessments, Project Plan Applications, and Implementation Plans)
  - Additional elements will be addressed through the PPS *Primary Care Plan Survey*

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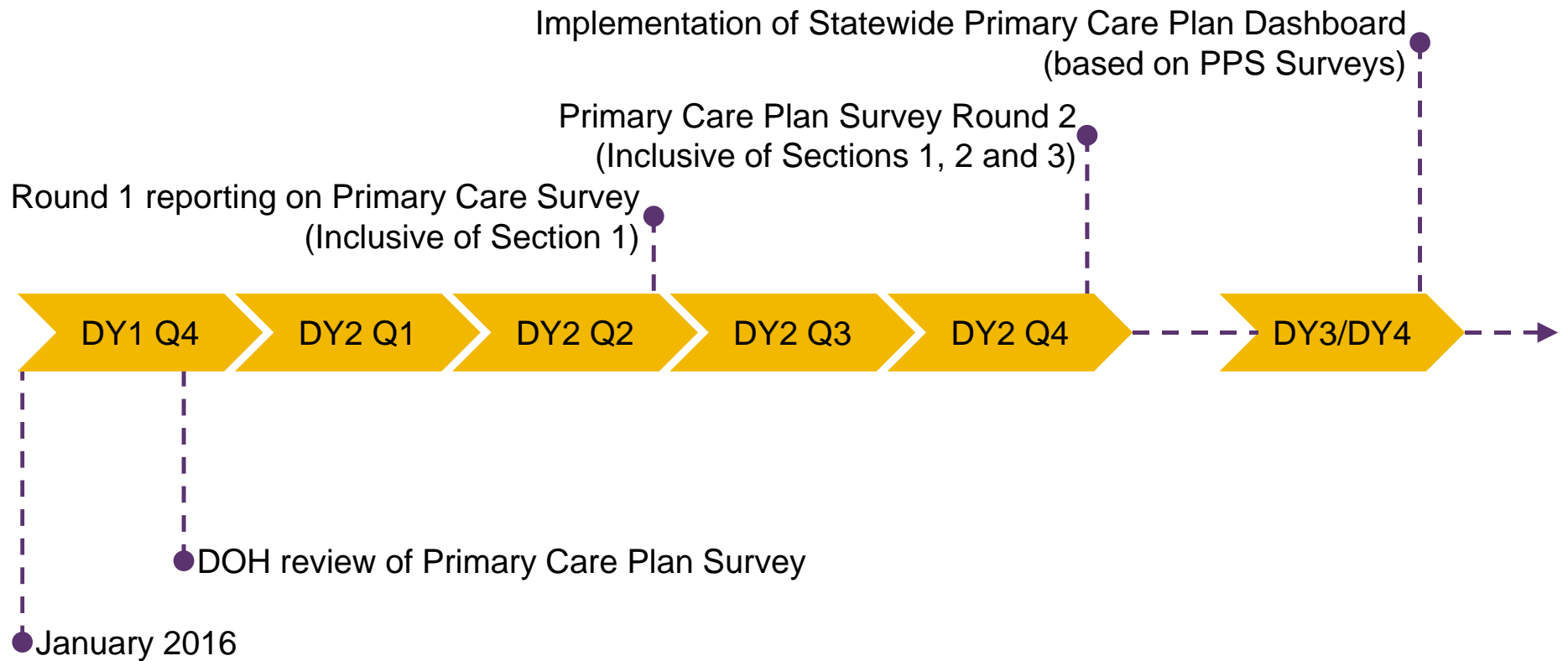- PPS will report on measures of access and capacity for sites with (or pursuing) PCMH/APC

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Submitting the Primary Care Plan

After the Primary Care Plans have been defined and the baselines have been collected:

- PPSs will be asked to report on its Primary Care Plan twice per year
- The IA and DOH will aim to review the plans in the same window as the review of that quarter's reports, with responses back to the PPS with the quarterly report responses

Updates will be supplemented with ongoing quarterly reporting, D1 Project Requirements, P4P Measurements (i.e. CAHPS measures), DSRIP Performance Management Modules and Primary Care Plan Survey iterations

Timeline

Implementation of Statewide Primary Care Plan Dashboard
(based on PPS Surveys)

Primary Care Plan Survey Round 2
(Inclusive of Sections 1, 2 and 3)

Round 1 reporting on Primary Care Survey
(Inclusive of Section 1)

| DY1 Q4 | DY2 Q1 | DY2 Q2 | DY2 Q3 | DY2 Q4 | DY3/DY4 |

DOH review of Primary Care Plan Survey

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Questions?

DSRIP e-mail:

dsrip@health.ny.gov