

# Albany Medical Center Hospital

## PAC MEETING - 10

### Delivery System Reform Incentive Payment Program

May 27, 2015

# Agenda

1. Updates
2. Overall Project Timeline
3. Code of Conduct -DRAFT
4. Implementation Plan – review and approval
  - a) Summary presentation of sections
  - b) Submission plan and next steps
5. Nominations for the PAC Executive Committee
6. Questions and Next Steps



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# Updates

- Dual factor authentication resolved
- Implementation plan split – 1<sup>st</sup> half due June 1<sup>st</sup> and second on July 31<sup>st</sup>; June submission will be revised based on DOH data
- Award letter received, contract signed by AMC and submitted to DOH 5/18/15
- 1<sup>st</sup> payment expected May 28<sup>th</sup>
- Likely restructuring of project management office



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# AMCH PPS – Award



**Department  
of Health**

**ANDREW M. CUOMO**  
Governor

**HOWARD A. ZUCKER, M.D., J.D.**  
Acting Commissioner

**SALLY DRESLIN, M.S., R.N.**  
Executive Deputy Commissioner

## **DSRIP Project Plan Award Letter**

**Between**  
**The New York State Department of Health (DOH)**  
**and**  
**Albany Medical Center Hospital (PPS Lead)**  
**43 New Scotland Avenue, Albany NY 12208**

**Period of Agreement**                      **From: April 1, 2015 To: December 31, 2020**  
**Valuation Award Amount: \$141,430,548**

<b>Net Project Value</b>	<b>Net High Performance Fund (3%)</b>	<b>Additional High Performance Fund (State Only)</b>	<b>Total Valuation</b>
<b>\$133,974,888</b>	<b>\$4,148,794</b>	<b>\$3,306,866</b>	<b>\$141,430,548</b>



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# AMCH PPS – Award

- “The PPS Lead will receive payments up to the maximum amount for each payment period based on the **performance of the PPS against the established performance milestones and reporting requirements.**”
- “**Failure to meet** the required performance milestones and reporting requirements **may result in a reduction to the payments or, in some instances, no payments,** made to the PPS Lead by the DOH.”



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# Code of Conduct

- DRAFT code of conduct transmitted. Open for comments and discussion. Expectation is to finalize and formally adopt code of conduct at our PAC meeting scheduled for June.



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# A phased approach to transformation

April 14, 2015 to March 31, 2016

- Project Implementation
- IT Systems evaluation
- Contracting
- Roadmap development for work streams
  - Workforce, Community Engagement, IT, etc.
- Baseline measurement
- Training and workforce development



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# Sections of the Implementation Plan

- Workforce Strategy
- Governance
- Financial Sustainability
- Cultural Competency and Health Literacy
- IT Systems and Processes
- Performance Reporting
- Practitioner Engagement
- Population Health Management
- Clinical Integration



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# Workforce Strategy

- Includes an analysis of the future workforce state, a roadmap for achieving it, as well as a detailed gap analysis between current and projected future states.
- A compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires and the development of a training strategy.

Presented by Diana Cartwright, Sr. DSRIP  
Project Coordinator



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# Governance

An obligation to the entire PPS to create a transparent, representative decision-making body that is inclusive of the diverse interests of the 5 county region served. Our committee structure attempts to address the various mandated sections of the implementation plan.

Presented by Kendal Pompey, Sr. DSRIP  
Project Coordinator



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# Financial Sustainability

Develop a budget and funds flow model and a reporting structure to further the goals of DSRIP. This section includes requirements for Audit and Compliance and processes for transitioning to a value based purchasing model.

Presented by Todd Faubel, Sr. DSRIP  
Project Coordinator



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# Cultural Competence and Health Literacy

This section addresses the importance of assessing and developing a regional system of providers that are culturally competent and the development of materials and processes that meet the health literacy levels of the target population.

Presented by Jenn Bates, Sr. DSRIP Project Coordinator



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# IT Systems and Processes

Assessment and development of the IT systems and processes needed to collect, analyze and report data to further the goals of DSRIP.

Presented by Sarah Wong, DSRIP Project Coordinator



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# Performance Reporting

Consistent with the development of IT Systems, this section addresses what needs to be done to document and report activities associated with milestone and metric reporting for both internal and external purposes.

Presented by Chrissy McIntyre, DSRIP  
Project Manager



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# Practitioner Engagement

This section addresses the important steps required to engage practitioners in adopting elements required to transform the system of care to focus on patient-centered care and the goals of DSRIP.

Presented by George Clifford, DSRIP  
Executive Director



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# Population Health Management

This section of the implementation plan addresses the steps and strategies to be developed to transform the system of care by integrating population health management across the region.

Presented by Shannon McWilliam, DSRIP  
Project Coordinator



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# Clinical Integration

Consistent with the triple aim and DSRIP goals, this section addresses the action steps needed to assess and transform the clinical delivery system through the development of care management, clinical protocols and activities required to integrate care.

Presented by Ronald Santiago, DSRIP  
Project Coordinator



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# Implementation Plan – 2.a.i IDS

## General Project Implementation:

- Overall approach to implementation
- Major dependencies between workstreams and coordination
- Overview of key stakeholders
- Roles and responsibilities
- IT requirements
- Performance monitoring
- Community engagement



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# Nominations for PAC Exec

Based on our existing charter, the following individuals are nominated for the AMCH PAC Executive Committee:



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# Executive Committee

## PAC EXECUTIVE COMMITTEE

AMC Executive Sponsor:	Dr. Steven Frisch	PMO Representative:	Clifford / Brooksby
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Seat	Last Name	First Name	Title	Organization
1	Venditti	Fred	Vice Dean, Clinical Affairs	Albany Medical Center
2	Martin	Joan	Director, Manage Care Contracting	Albany Medical Center
3	Stack	Kim	Administrator	Barnwell Nursing and Rehabilitation Center
4	Hayner	Joan	CEO	CapitalCare Medical Group, LLC
5	Brown	Keith	Executive Director	Catholic Charities Care Coordination Services
6	Kearsing	Lori	Special Assistant to the President/CEO	Center for Disability Services
7	Davis	George	MD, Psychiatry	Columbia Memorial Hospital
8	VanSlyke	Bill	VP, Marketing and External Affairs	Columbia Memorial Hospital
9	Mitnick	Neil	Albany Family Medicine	Community Care Physicians, PC
10	Jobin-Davis	Kevin	Executive Director	Healthy Capital District Initiative
11	LaFrenier	Audrey	COO	Northern Rivers Family Services
12	Atkins	Kim	President/CEO	Planned Parenthood Mohawk Hudson, Inc.
13	Paduano	John	Managing Director	Rehabilitation Support Services
14	Jones	Dot	Manager, Strategic Business Information	Saratoga Hospital
15	Stack	Keith	Executive Director	The Addictions Care Center of Albany, Inc.
16	Oberlander	Harris	CEO	Trinity Alliance of the Capital Region, Inc.
17	Larman	Susan	CEO	VNA Home Health / Visiting Nurses Home Care
18	Shippee	David	President/CEO	Whitney Young Jr. Health Center



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Requested vote:



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# Questions

You may also e-mail George Clifford  
[cliffog@mail.amc.edu](mailto:cliffog@mail.amc.edu)

Dr. Kallanna Manjunath  
[manjunathk@mail.amc.edu](mailto:manjunathk@mail.amc.edu)

Or Evan Brooksby  
[brookse1@mail.amc.edu](mailto:brookse1@mail.amc.edu)



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