



Notes from 8/25 Value Based Payments (VBP) Social Determinants of Health (SDH) & Community Based Organizations (CBOs) Informational Webinar

Hosted by New York State Medicaid Director (SMD) Jason Helgeson with Liz Mesa (lead on VBP SDH effort at DoH)

Side Note:

See our (NYS Council) email from 8/24 re: state's announcement of VBP University – Semester 2 scheduled to begin early September.

Goals for today's webinar:

- Discuss what SDH are in the context of VBP and what role the state sees for CBOs
- More collaboration btwn providers and with insurers to contract and address SDH.

State's VBP Roadmap Requirements

Initial NYS VBP Action Plan for Medicaid Transformation (MRT) began with 5 year action but continues movement towards obtaining greater efficiencies and better outcomes. This relies on providers.

One requirement of waiver was need for NYS to implement VBP. Agreed that overall, 80% of all Medicaid payments must include a value based arrangement by end of 5 year period. (Tier II and III = 35%.)

Currently 1/3 of all NYS Medicaid payments are value based - ways to go to meet commitment to CMS.

2 Types of Guidance in state's updated VBP Roadmap:

- Standards (requirements for participants)
- Guidelines (suggestions for participants)

Should see Roadmap as series of options and flexibility to tailor VBP involvement to community needs.

In VBP risk arrangements (where there is upside and downside risk - Tiers 2 & 3), participants/insurers must measure the success of at least one SDH intervention. There is flexibility in Roadmap re: selection of particular SDHs and accompanying interventions.

Insurers must report to state on selection and success of SDH interventions.

-Updated Roadmap states contractors in Tier 2 and 3 risk arrangements must also contract with a Tier 1 CBO (provider that is not a Medicaid certified provider).

-Contractors are encouraged to use (when appropriate) Patient Reported Outcomes (PROs)

Insurers must report to state on selection and success of SDH interventions.

MCOs must report on fund utilization (see slide 11) using state template that will be on VBP website early next week.

See SDH Intervention Menu (slide 14). (Menu available for download on NYS VBP library.)

(At this point in the Webinar partial viewing of video re: Empire BCBS / Bronx Housing Coalition pilot focused on addressing SDH of homeless New Yorkers in the Bronx.) (Video available on VBP website.)

After identifying high cost homeless Medicaid members, placed these members into Supportive Housing with dramatic decreases in inpatient ED use, admissions and other high value measures.

Inclusion of Tier 1 CBOs:

Again, starting Jan 2018, BOTH NEW AND EXISTING VBP contractors in Tiers 2 & 3 risk arrangements must contract with at least one Tier 1 CBO.

(Tier 1 CBO = Nonprofit, non-Medicaid billing CBO)

How to Prepare Your CBO Now:

(See slides 25, 26):

Resources include:

- CBO Planning Grants
- DSRIP Innovation Fund

Tier 1 CBOs and Contracting with Tier 2 & 3 contractors:

-Tier 1 CBOs are NOT REQUIRED to be the organization(s) that implements the SDH Intervention(s).

-VBP Level 2 & 3 contracts without SDH and CBO requirements will not meet the definition of VBP.

CBO Contracting Strategies:

- with MCO itself
- subcontract w/ a VBP contractor (hospital, hospital system, IPA, ACO, etc.)

-CBOs not required to take on risk! Contracts can either include risk sharing (VBP Levels @ & 3) or be non-risk based (VBP Level 1 upside only) or payment for services rendered.

-Common element of contract could include bonus payments or could simply be a contract. CBOs must expect contracts with contractor to include performance measures!

See additional commitments made by NYS in the updated NYS VBP Roadmap (slide 33).

State's 2017 VBP Bootcamp series will begin 10/2017.

State exploring dedicated website to identify Tier 1 CBOs, to facilitate contracting with CBOs.

State to release FAQs related to SDH and CBOs based on the questions received before, during and after today's Webinar.

Resources:

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