Prevention Agenda and DSRIP

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New York State Health Initiatives

**PREVENTION AGENDA**

**Priority Areas:**
- Prevent chronic diseases
- Promote a healthy and safe environment
- Promote healthy women, infants, and children
- Promote mental health and prevent substance abuse
- Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases, and healthcare-associated infections

**STATE HEALTH INNOVATION PLAN (SHIP)**

**Pillars and Enablers:**
- Improve access to care for all New Yorkers
- Integrate care to address patient needs seamlessly
- Make the cost and quality of care transparent
- Pay for healthcare value, not volume
- Promote population health
- Develop workforce strategy
- Maximize health information technology
- Performance measurement & evaluation

**ALIGNMENT:**
- Improve Population Health
- Transform Health Care Delivery
- Eliminate Health Disparities

**MEDICAID DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM**

**Key Themes:**
- Integrate delivery – create Performing Provider Systems
- Performance-based payments
- Statewide performance matters
- Regulatory relief and capital funding
- Long-term transformation & health system sustainability

**POPULATION HEALTH IMPROVEMENT PROGRAM (PHIP)**

**PHIP Regional Contractors:**
- Identify, share, disseminate, and help implement best practices and strategies to promote population health
- Support and advance the Prevention Agenda
- Support and advance the DSRIP
- Serve as resources to DSRIP Performing Provider Systems
New Opportunities with NY Health Care Reform

- Local Health Departments (LHDs): lead community health assessment process and lead/participate in community health improvement planning with hospitals locally and with PPSs regionally

- Hospitals: work with LHDs and community partners to conduct assessments and health improvement plans, and connect work where possible with DSRIP projects
Connecting Prevention Agenda (PA) and DSRIP

- Issued Guidance to PPSs for Domain 4 that reflects PA and population health evidence-based interventions
- Reviewed Applications and Implementation Plans from PPSs to assess conformity with PA and provided suggestions for improvement
- Encourage participation of LHDs in PPS networks
- 47 tracking indicators from the PA dashboard are used for tracking population health improvement in DSRIP Domain 4 at PPS, county and state levels
Domain 3: Clinical Improvement Projects

October 1, 2015

Project 3.b.i: Cardiovascular Health

Map Key
- CVD Project Selected (3.b.i)
- Not Selected

Eight of eleven CDRP regions selected this project area.

Related Prevention Agenda Intervention

Region | PPS
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New York City | Advocate Community Partners (AW)
Capital District | Albany Medical Center Hospital
Western NY | Catholic Medical Partners
Central NY | Central NY PPS
New York City | HHC Facilities
New York City | Maimonides Medical Center
Western NY | Millennium Collaborative Care (ECMC)
Mid-Hudson | Montefiore Medical Center
New York City | Mount Sinai Hospital Group
Long Island | Nassau County PPS
New York City | NY Hospital Center of Queens
Tug Hill Seaway | Samaritan Medical Center
New York City | St. Barnabas Hospital
Long Island | Stony Brook University Hospital
Southern Tier | United Health Services Hospitals
Project 3.c.i & Project 3.c.ii: Diabetes

Region PPS
New York City Advocate Community Partners (AW)
New York City Bronx-Lebanon Hospital Center
New York City Lutheran Medical Center
New York City Mount Sinai Hospital Group
Long Island Nassau County PPS
New York City Richmond Univ. Med Ctr & Staten Island Univ. Hospital
Tug Hill Seaway Samaritan Medical Center (both 3.c.i + 3.c.ii)
New York City St. Barnabas Hospital
Long Island Stony Brook University Hospital
Mid-Hudson Westchester Medical Center

Project 3.d.ii & Project 3.d.iii: Asthma

Region PPS
New York City Advocate Community Partners (AW)
Capital District Albany Medical Center Hospital
New York City Bronx-Lebanon Hospital Center
Capital District Ellis Hospital
New York City HHC Facilities
New York City Lutheran Medical Center
New York City Maimonides Medical Center
Mohawk Valley Mohawk Valley (Bassett)
Mid-Hudson Montefiore Medical Center
New York City St. Barnabas Hospital
Long Island Stony Brook University Hospital
New York City The NY Hospital of Queens
Mid-Hudson Westchester Medical Center
Example: Asthma Collaboration in Schenectady

- iHANY (Ellis & St. Peter’s PPS) project plan
  - Asthma self-management program: home environmental trigger reduction, self-monitoring, medication use, patient follow-up.

- Ellis Hospital and Schenectady County Health Department collaborative Community Service Plan/Community Health Improvement Plan
  - Care coordination, home visits/assessments, and asthma education for patients
  - Implement smoke-free policies at two mental health offices
  - Improve prescribing concordance with NIH guidelines
  - Complement the Better Neighborhood Program that works toward improving the neighborhood (e.g. tobacco, lead poisoning, asthma)

- Participating Community Partners
  - Asthma Coalition of the Capital Region
  - Schenectady Asthma Support Collaborative (intensive case management in high needs areas)
  - Schenectady School-Based Asthma Management Program
  - Capital District Tobacco-Free Coalition (set up tobacco-free housing in three municipal housing developments, and continuing work to increase smoke-free housing in all neighborhoods in the County)

Project 3.d.iii: HIV/AIDS

Map Key
- HIV/AIDS Project Selected (3.d.iii)
- Not Selected
- One of eleven DSRIP regions selected this project area.
- Related Prevention Agenda Intervention

Region | PPS
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New York City | The NY and Presbyterian Hospital
Project 3.f.i: Perinatal Health

Domain 4: Population-wide Projects (Prevention Agenda)
Projects 4.a.i,ii,iii: Mental Health and Substance Abuse

4.a.i – Promote mental, emotional and behavioral well-being in communities
Region PPS
Western NY Catholic Medical Partners

4.a.ii – Prevent substance abuse and behavioral disorders
Region PPS
Long Island Stony Brook University Hospital

4.a.iii – Strengthen mental health and substance abuse infrastructure across systems
Region PPS
Capital District Ellis Hospital

Sixteen PPSs in ten regions selected MH/SA projects

Related Prevention Agenda Intervention

Project 4.b.i: Tobacco Cessation

Region PPS
Capital District Albany Medical Center Hospital

Map Key
- Chronic Disease 4 b.i Project Selected
- Not Selected

Six of eleven DRP regions selected this project area

Related Prevention Agenda Intervention
Project 4.b.ii: Preventive Care Management

Region | PPS | Focus of 4.b.ii
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North Country | Adirondack Health Institute | COPD
New York City | Advocate Community Partners (AW) | Cancer and hepatitis screening; HPV vaccines
Capital District | Albany Medical Center Hospital | Cancer screening
Finger Lakes | Finger Lakes PPS | Obesity and Tobacco in high risk populations, especially low SES
Mid-Hudson | Montefiore Medical Center | Cancer screening and prevention
New York City | Mt. Sinai Hospital Group | Cancer, Hep C, Chlamydia screening; increase well child visits
New York City | Richmond Univ. Med Ctr & Staten Island Univ. Hospital | Cancer, COPD and hypertension
Tug Hill Seaway | Samaritan Medical Center | COPD and Cancer
Long Island | Stony Brook University Hospital | Cancer screening; tobacco cessation; obesity
Southern Tier | United Health Services Hospitals | COPD
Mid-Hudson | Westchester Medical Center | Cancer screening

Project 4.c.i & 4.c.ii: HIV and STDs

Region | PPS
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New York City | Bronx-Lebanon Medical Center
New York City | HHC Facilities
New York City | Lutheran Medical Center
New York City | Maimonides Medical Center
New York City | Mount Sinai Hospitals Group
New York City | St. Barnabas Hospital
New York City | The NY and Presbyterian Hospital
New York City | The NY Hospital of Queens
Summary

- Significant alignment between the Prevention Agenda and DSRIP projects
- PPSs embracing Domain 3 and 4 projects and concept of population health
- Ongoing commitment to collaborate and focus on many of the priorities of the Prevention Agenda with DSRIP
Question for Discussion

• What opportunities are there to strengthen linkages between partners and between initiatives to maximize impact?