

Assessment of Pay- for-Reporting Deliverables: Semi- annual Report and Implementation Plan

Myers and Stauffer LC

April 2018



Today's Speakers

Terri Branning and Jennifer Kyritsis

COMMON TERMS

Term	Definition
Accountable Communities of Health (ACH)	Self-governing organizations with multiple community representatives that are focused on improving health and transforming care delivery for the populations that live within their region.
Accountable Communities of Health (ACH) Projects	The menu of eight Medicaid Transformation projects that ACHs may choose to implement, as outlined in the Project Toolkit. Each ACH is required to implement a minimum of four projects.
Achievement Value (AV)	Point values assigned to 1) reporting on project implementation progress and 2) performance on outcome metrics for an associated payment period. ACHs can earn AVs by providing evidence of completion of reporting requirements, and demonstrating performance on outcome metrics. The amount of incentive funding paid to an ACH is based on the number of earned AVs out of total possible AVs for a given payment period.
Independent Assessor (IA)	State-contracted entity tasked with assessing ACH Project Plans, semi-annual reports, and implementation plans. The IA is also responsible for conduct of the DSRIP mid-point assessment and overall monitoring for at-risk projects, and for calculating earned project incentives based on Pay for Reporting (P4R) milestones, deliverables, and metrics and Pay for Performance (P4P) metrics.

COMMON TERMS

Term	Definition
Pay-for-Reporting (P4R) Deliverables	The reporting mechanism for ACHs to demonstrate project implementation progress to the state. P4R deliverables include reporting on specific P4R milestones in semi-annual reports or implementation plans, and ongoing project monitoring by reporting on P4R metrics. ACHs can earn P4R project incentives for complete and timely submission of P4R deliverables.
Pay-for-Reporting (P4R) Milestones	Captured in specific P4R deliverables, P4R milestones are indicators of progress through the project planning, implementation and sustainability stages of ACH project activities.
Pay-for-Reporting (P4R) Metrics	Metrics that are intended to capture information not obtainable through other reporting means and to provide more detailed information about implementation progress. ACHs will report to the state the P4R metric data collected semi-annually from partnering providers starting in Demonstration Year (DY) 3.
Partnering Provider	Providers that have committed to participate in ACH projects, including but not limited to: clinical providers, community-based organizations, county governments, and/or tribal governments and providers.
Project Areas	The eight Medicaid Transformation projects that ACHs can implement.
Project Portfolio	The full set of project areas an ACH has chosen to implement.

AGENDA



Webinar Objectives and Independent Assessor Role

ACH Semi-annual Reports

ACH Implementation Plans

Achievement Values

KEY OBJECTIVES OF WEBINAR

Objective 1

Explain the intent of semi-annual reporting and the implementation plan, and how they connect to Project Plans.

Objective 2

Provide an overview of the Independent Assessor's approach to assessment of semi-annual reports.

Objective 3

Provide an overview of the Independent Assessor's approach to assessment of the implementation plans.

Objective 4

Explain how P4R deliverables connect to Achievement Values and project incentives.

INDEPENDENT ASSESSOR ROLE

Independent Assessor



ACH Semi-annual Reporting

ACH SEMI-ANNUAL REPORTING

Overview: Key Characteristics

Purpose and Objectives

- Essential component of monitoring that provides information to evaluate ACH project implementation progress and achievement of project milestones.
- One element of P4R requirements set forth in Healthier Washington Medicaid Transformation Special Terms and Conditions.

Reviews and Approvals

- Independent Assessor conducts a detailed assessment.
- The Washington State Health Care Authority (HCA) maintains final approval of findings and Achievement Values (AVs).

Reporting Cycles

- Reporting is required two times per Demonstration Year (DY).
- July 31 submissions are for the reporting period January 1 through June 30.
- January 31 submissions are for the reporting period July 1 through December 31.
- HCA plans to release the semi-annual reporting template for each reporting period six months prior to the reporting due date.

ACH SEMI-ANNUAL REPORTING

Overview: Semi-annual Report 1 Assessment Timeline



ACH SEMI-ANNUAL REPORTING

Overview: Report Template

Section I: Project Milestones

- Are intended to determine ACH progress specific to each stage of project activities.
- Represent the core stages of project activities that pertain to project planning, project implementation, and efforts to scale and sustain.
- Evolves over time to reflect milestones due during the reporting period.

Section II: Standard Reporting Requirements

- Topic areas will be consistently requested for each semi-annual report.
- Questions may evolve as the Transformation progresses.
- Requirements may be added.

ACH SEMI-ANNUAL REPORTING

Semi-annual Report 1

Section	Sub-Section Description
Section 1. Required Toolkit Milestones (DY 2, Q2)	Milestone 1: Assessment of Current State Capacity
	Milestone 2: Strategy Development for Domain I Focus Areas (Systems for Population Health Management, Workforce, Value-based Payment)
	Milestone 3: Define Medicaid Transformation Evidence-based Approaches or Promising Practices, Strategies, and Target Populations
	Milestone 4: Identification of Partnering Providers

ACH SEMI-ANNUAL REPORTING

Semi-annual Report 1

Section	Sub-Section Description
Section 2. Standard Reporting Requirements	ACH Organizational Updates
	Tribal Engagement and Collaboration
	Project Status Update
	Partnering Provider Engagement
	Community Engagement
	Health Equity Activities
	Budget and Funds Flow

ACH SEMI-ANNUAL REPORTING

Report Development

Report Content

- Focus of responses should be on how milestones have been met and progress made during reporting period.
- Information is requested for the ACH organization, the ACH's partnering providers, or both. The template indicates the level of information each response should reflect.
- HCA will provide individualized Microsoft Excel workbooks to each ACH pre-populated with partnering provider and budget information via WA CPAS.

Report Development

- ACHs are strongly encouraged to be concise.
- ACHs may insert text, tables, and graphics into the semi-annual report template.
- ACHs should not delete template information or existing tables. *Exception: Table provided for Milestone 3 can be replaced if the ACH elects to use an alternate format.*

ACH SEMI-ANNUAL REPORTING

Submission Instructions

WA CPAS

- Submissions are to be made through WA CPAS no later than 3:00 p.m. PST on July 31, 2018.
- Folder path: ACH Directory/Semi-annual Reports/Semi-annual Report 1 – July 31, 2018.

File Naming Conventions

- Files should be submitted in Microsoft Word and Microsoft Excel or a searchable PDF format.
- Naming conventions should follow the below formats:
 - *Main Report or Full PDF:* ACH Name.SAR1 Report. 7.31.18
 - *Excel Workbook:* ACH Name.SAR1 Workbook. 7.31.18
 - *Attachments:* ACH Name.SAR1 Attachment X. 7.31.18

HCA Posting of Semi-annual Reports

- Semi-annual reports will be posted publicly.

ACH SEMI-ANNUAL REPORTING

Assessment Process: Minimum Submission Requirements

Acknowledgement

- IA will send an email to each ACH acknowledging receipt of the semi-annual report.

Minimum Submissions Requirement Review

- IA will review each report and notify the ACH within one business day of receipt of report if minimum submission requirements are missing.
- IA will be available to respond to questions the ACHs have about the information request.
- ACHs will have one business day after written notification from Myers and Stauffer to submit missing responses.

ACH SEMI-ANNUAL REPORTING

Assessment Process: Detailed Assessment

Assessment Process

- IA will conduct detailed assessments of all ACH semi-annual reports.
- Primary reviewers will conduct a full assessment of each report.
- Secondary reviewers will review responses determined by primary reviewers as not meeting expectations.

Assessment Expectations

- Assessment based on ACH responses being “Complete” or “Incomplete”.
- Each question or element within a sub-section will be marked as “Complete” or “Incomplete”.
- Attestations marked by an ACH as “No” will receive an “Incomplete”.
- Questions for which responses are not submitted will be marked as “Incomplete”.
- If any question or element within a sub-section is marked as “Incomplete”, the entire sub-section receives an “Incomplete”. **Exception:** *Milestone 3 assessment by project will be at the element level.*

Met Expectations



Attestation is marked as “Yes”.



Information provided is fully responsive to all elements of the question.



Information is understandable and includes details to show progress made in compliance with Protocols.

ACH SEMI-ANNUAL REPORTING

Assessment Process: Documenting Findings

Information Included in Findings Submission

- Listing by question of whether responses are complete or incomplete.
- Basis for our determinations for any questions listed as not met and related concerns or potential risks.
- Recommendation for additional information request, if any, for each ACH.
- Recommendation for payment.

Findings Submission

- IA will submit findings to HCA for each ACH.
- IA and HCA will meet to discuss findings for each ACH.

ACH SEMI-ANNUAL REPORTING

Assessment Process: Additional Information Request

Request for Information

- IA will submit additional information requests to ACHs in writing via email.

ACH Responses

- ACHs must submit responses to requests for information within 15 calendar days.
- Submissions are to be made through WA CPAS.
- IA will be available to respond to questions the ACHs have about the information request.

IA Assessment and HCA Decision

- IA will assess the ACH response to finalize findings for submission to HCA.
- HCA will use the DSRIP governance and decision-making group for final determination of semi-annual report approval.

ACH Implementation Plans

ACH IMPLEMENTATION PLANS

Overview: Key Characteristics

Purpose and Objectives

- Provides a detailed roadmap on Medicaid Transformation project implementation activities.
- Is a P4R requirement set forth in Healthier Washington Medicaid Transformation Special Terms and Conditions.

Reviews and Approvals

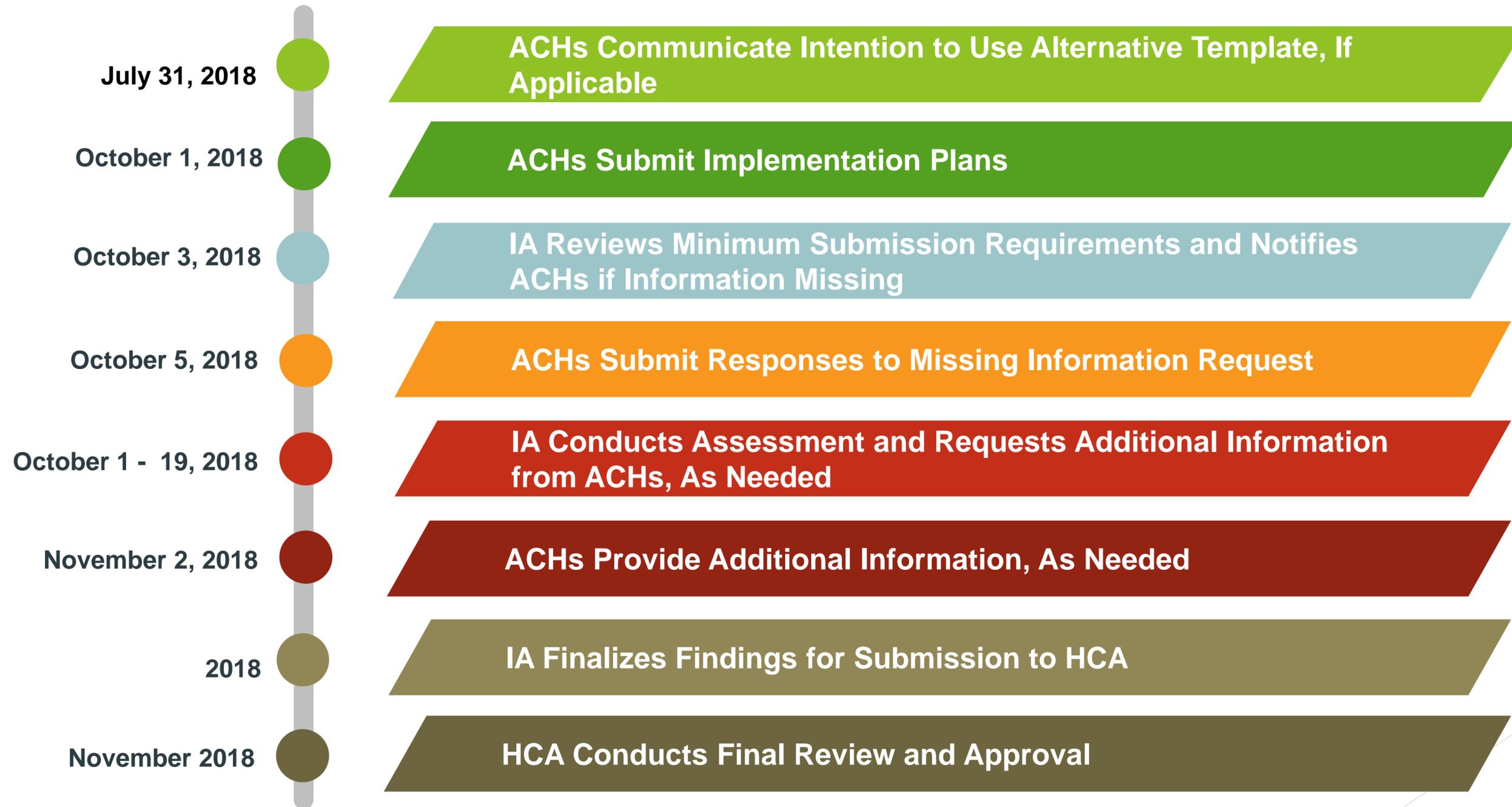
- IA conducts a detailed assessment.
- HCA maintains final approval of findings and related Achievement Value (AV).

Reporting Deadline

- Implementation plan is due October 1, 2018.
- ACHs will report against information set forth in the implementation plan in future semi-annual reports to show progress.

ACH IMPLEMENTATION PLANS

Overview: Implementation Plan Submission and Assessment Timeline



ACH IMPLEMENTATION PLANS

Work Plan Requirements

Work Plan Template

- The work plan is a core component of the Implementation Plan for which ACHs must provide detailed activities for all remaining years of the Medicaid Transformation Project
- ACHs have option to submit project work plans using:
 - HCA's template work plan.
 - An ACH-developed format.

Work Plan Components

- Work plan must identify key work steps, deliverables, owners, and timeline.
- Beyond the milestones identified in the Implementation Plan Work Plan Template (based on the Medicaid Transformation Project Toolkit), ACHs must identify additional milestones and associated work steps to convey the work happening in their regions.

Section	Milestone Stages
Work Plan Requirements	Stage 1: Planning
	Stage 2: Project Implementation
	Stage 3: Scale and Sustain

ACH IMPLEMENTATION PLANS

Portfolio Narrative

Portfolio Narrative Components

- Assesses the ACHs' preparation and current activities in key implementation areas across the project portfolio.
- ACHs must provide a clear understanding of near-term implementation activities (DY 2, Q3 through DY 3, Q4).

Section	Sub-Section
Portfolio Narrative	Partnering Provider Project Roles <i>Concrete examples of work being conducted at the partnering provider organization level.</i>
	Partnering Provider Engagement <i>How the ACH supports partnering providers in project implementation.</i>
	Partnering Provider Management <i>How the ACH ensures partnering providers are driving forward project implementation.</i>
	Alignment with Other Programs <i>How the ACH ensures partnering providers avoid duplicating, and promote synergy with, existing Medicaid resources.</i>
	Regional Readiness for Transition to Value-based Care <i>How the region is advancing value-based care objectives.</i>
	Regional Readiness for HIT / HIE <i>How the region is advancing Health Information Technology / Health Information Exchange objectives.</i>
	Technical Assistance Resources and Support <i>Description of the technical assistance resources and support the ACH requires from HCA and other state agencies.</i>

ACH IMPLEMENTATION PLANS

Submission Instructions

WA CPAS

- Submissions are to be made through WA CPAS no later than 3:00 p.m. PST on October 1, 2018.
- Folder path: ACH Directory/Implementation Plan

File Naming Conventions

- ACHs must submit work plan in Microsoft Excel or Word or Adobe Acrobat and portfolio narrative in Microsoft Word.
- Use the following naming convention:
 - Work Plan(s): ACH Name.IP.Work Plan.Project Identifier.10.1.18
 - Portfolio Narrative: ACH Name.IP.Portfolio Narrative.10.1.18

HCA Posting of Implementation Plans

- Implementation plans will be posted publicly.

ACH IMPLEMENTATION PLANS

Assessment Process: Minimum Submission Requirements

Acknowledgement

- IA will send an email to each ACH acknowledging receipt of the implementation plan.

Minimum Submission Requirements

- IA will conduct a high-level review of Minimum Submission Requirements and notify ACH within two business days of receipt of plan if information is missing.
- IA will be available to respond to questions the ACHs have about the information request.
- ACHs will have two business days after written notification from IA to submit missing responses.

ACH IMPLEMENTATION PLANS

Assessment Process: Detailed Assessment

Assessment Process

- IA will conduct detailed assessments of implementation plans.
- Reviewers will be assigned by ACH and across projects.

Assessment of Implementation Plans

- Assessment based on implementation plan being “Complete” or “Incomplete”.
- Any required elements that are not addressed will be marked as “Incomplete”.
- Work plan sections that are found to be lacking in steps or required details will be marked as “Incomplete.”
- If any question or element within a sub-section of the Project Narrative is marked as “Incomplete”, the entire sub-section receives a “Incomplete”.

Complete Response



Information provided is fully responsive to all required Implementation Plan elements.



Project narrative is clear and complete.



Work plan is clear and includes activities to show a complete process for making progress in Transformation.

ACH IMPLEMENTATION PLANS

Assessment Process: Additional Information Request

Request for Information

- IA will submit additional information requests to ACHs in writing via email.
- Requests may require updated Implementation Plans.

ACH Responses

- ACHs must submit responses within required timeframes.
- Submissions are to be made through WA CPAS.
- IA will be available to respond to questions the ACHs have about the information request.

ACH IMPLEMENTATION PLAN

Assessment Process: Documenting Findings

Information Included in Findings Submission to HCA

- Listing by sub-section of what was found to be complete and not complete.
- Basis for determinations for sub-sections found as not complete and related concerns or potential risks.
- Recommendation for payment.
- Areas recommended for specific monitoring and feedback to ACH.

IA Assessment and HCA Decision

- IA will assess information received from ACHs in response to information request, and IA will finalize findings.
- HCA will use the DSRIP governance and decision-making group for final determination of approval.

Achievement Values

ACHIEVEMENT VALUES

What are They?

Definition

- Point values assigned to:
 - Reporting on project implementation progress.
 - Performance on outcome metrics for an associated payment period
- Amount paid to an ACH based on number of earned AVs out of total possible AVs for a given payment period.

Pay-for-Reporting (P4R)

- Amount of incentive funding paid to an ACH is based on amount of progress made toward completing the milestones and deliverables.
- For DY2, the semi-annual reports and implementation plans are the required deliverables.
- P4R AVs are binary – there is no potential for partial AVs.

ACHIEVEMENT VALUES

Allocation of ACH Project Incentives by Medicaid Demonstration Year

Metric Type	DY1	DY2	DY3	DY4	DY5
Pay-for-Reporting	100%	100%	75%	50%	25%
Pay-for-Performance	0%	0%	25%	50%	75%

ACHIEVEMENT VALUES

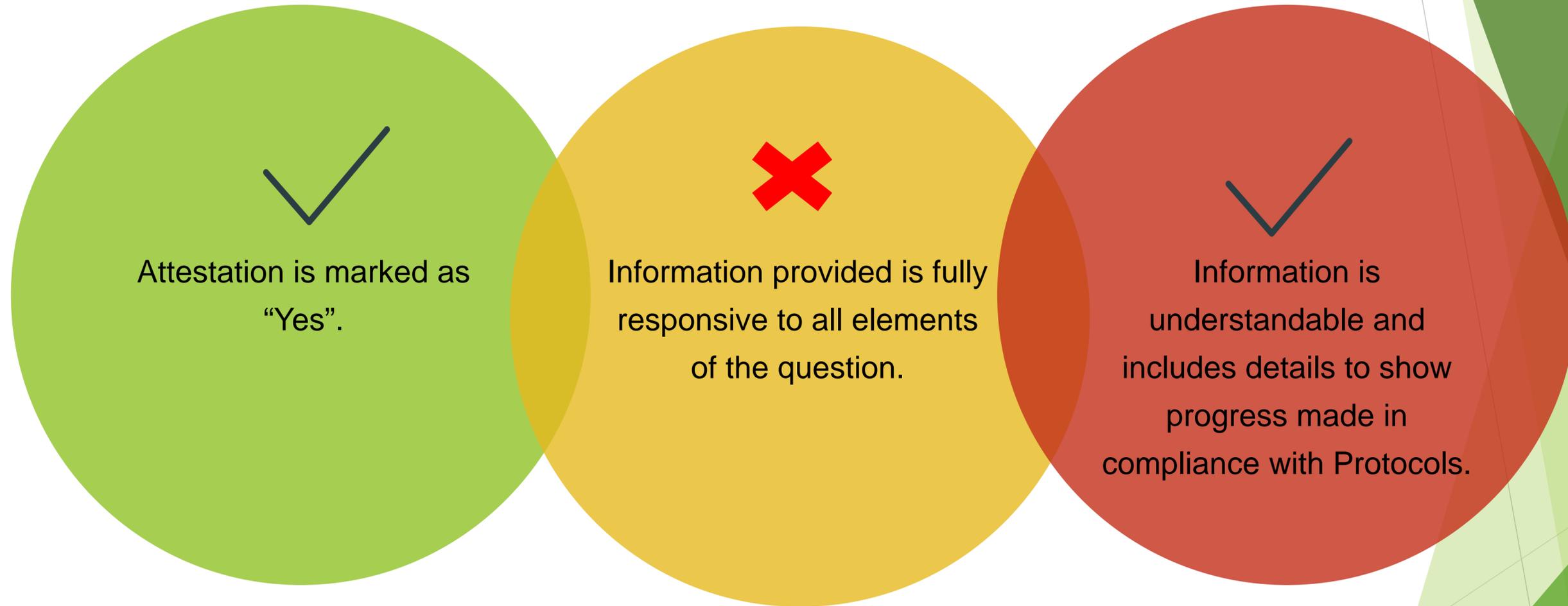
Example Calculations for DY2

DY2 Project Valuation				
	Rebased Project Weight	Total Potential Incentives (Jan – Dec 2018)	Potential Incentives (Jan – June 2018)	Potential Incentives (Jul – Dec 2018)
<i>Domain 2: Care Delivery Redesigns</i>				
2A: Bi-directional Integration of Physical and Behavioral Health through Care Transformation	49%	\$969,697.00	\$484,848.50	\$484,848.50
2B: Community Based Care Coordination	33%	\$666,667.00	\$333,333.50	\$333,333.50
2C: Transitional Care	N/A	N/A	N/A	N/A
2D: Diversions Interventions	N/A	N/A	N/A	N/A
<i>Domain 3: Prevention and Health Promotion</i>				
3A: Addressing the Opioid Use Crisis	6%	\$121,212.00	\$60,606.00	\$60,606.00
3B: Reproductive and Maternal and Child Health	N/A	N/A	N/A	N/A
3C: Access to Oral Health Services	N/A	N/A	N/A	N/A
3D: Chronic Disease Prevention and Control	12%	\$242,424.00	\$121,212.00	\$121,212.00
Total	100%	\$2,000,000.00	\$1,000,000.00	\$1,000,000.00

Note: All project incentives in DY2 are P4R.

ACHIEVEMENT VALUES

Example: Semi-Annual Report 1 Assessment



Assessment of Milestone 1: Incomplete due to critical gaps not being addressed.

ACHIEVEMENT VALUES

Example Calculations for DY2 Reporting Period 1: P4R Achievement Values

P4R Deliverables and Milestones	Available AVs per Project	AVs Earned per Project	Number of Projects	Number AVs Earned
Completed Semi-Annual Report (<i>credit for all non-milestones</i>)	1.0	1.0	4.0	4.0
Completed Assessment of Current State Capacity	1.0	0.0	4.0	0.0
Completed Strategy Development for Domain 1 Focus Areas (Systems for Population Health Management, Workforce, VBP)	1.0	1.0	4.0	4.0
Defined Medicaid Transformation Evidence-based Approaches or Promising Practices, Strategies, and Target Populations	1.0	1.0	4.0	4.0
Identified Partnering Providers	1.0	1.0	4.0	4.0
<i>Maximum Possible</i>	<i>5.0</i>		<i>20.0</i>	
<i>Total</i>		<i>4.0</i>		<i>16.0</i>

Note: Each Milestone will earn Achievement Values for each associated project.

ACHIEVEMENT VALUES

Example Calculations for DY2 Reporting Period 1: P4R Achievement Values

Semi-annual Report 1 Project Incentive Payment					
	Total AVs Achieved	Maximum AVs Possible	Percent AVs Achieved	Potential Incentives (Jan - June 2018)	Actual Earned Incentives (Jan - June 2018)
<i>Domain 2: Care Delivery Redesigns</i>					
2A: Bi-directional integration of physical and behavioral health through care transformation	4	5	80%	\$ 484,848	\$ 387,879
2B: Community Based Care Coordination	4	5	80%	\$ 333,333	\$ 266,667
2C: Transitional Care	N/A	N/A	N/A	N/A	N/A
2D: Diversions Interventions	N/A	N/A	N/A	N/A	N/A
<i>Domain 3: Prevention and Health Promotion</i>					
3A: Addressing the Opioid Use Crisis	4	5	80%	\$ 60,606	\$ 48,485
3B: Reproductive and Maternal and Child Health	N/A	N/A	N/A	N/A	N/A
3C: Access to Oral Health Services	N/A	N/A	N/A	N/A	N/A
3D: Chronic Disease Prevention and Control	4	5	80%	\$ 121,212	\$ 96,970
Total	16	20		\$ 1,000,000	\$ 800,000



CONTACT US



Submit semi-annual reports and implementation plans through the WA CPAS at:

<https://cpaswa.mslc.com/>.



Questions should be directed to

WADSRIP@mslc.com.