



**Department  
of Health**

Medicaid  
Redesign Team

# Health Home Development Fund Resources Use and Reporting Requirements

March 23, 2015

# Agenda

- CMS Approval of State Plan Amendment of Health Home Development Funds (HHDF)
- Calculation of PMPM Rate Add-on and Payment Schedule
- Authorized Uses and Funding Categories:
  - Member Engagement and Health Home Promotion
  - Workforce training and retraining
  - Clinical connectivity and Health Information Technology (HIT) Implementation
  - Joint governance technical assistance
- Requirements and Procedures for Identifying how HHDF are used
- Rate Calculation and Payment
- Reporting Requirements

# Opportunities to Improve and Leverage Health Home Infrastructure and Improve Performance

The Health Home Development Funds (HHDF) will provide resources to leverage opportunities to:

- ✓ Improve outreach and enrollment efforts, including for members that will be enrolled in Health and Recovery Plans (HARPs);
- ✓ Align and complement Performing Provider System (PPs) activities related to Delivery System Reform Incentive Payment (DSRIP) projects and overall goal of reducing avoidable hospital use;
- ✓ Launch the development and enrollment of children in Health Homes;
- ✓ Continue to leverage the use of Health Information Technology to improve care management performance and payment processes to downstream providers.

# CMS Approval of Health Home Development Funds (HHDF)

- On March 10, 2015 the Centers for Medicare and Medicaid (CMS) approved the State Plan Amendment (SPA) to implement the \$190.6 million of Health Home Development Funds authorized in the MRT 1115 Waiver amendment.
- The SPA:
  - Authorizes HHDF to be distributed through a temporary rate add on to the per member per month (PMPM) fee to be paid to the lead designated Health Home;
  - Provides for a methodology to calculate the rate add on and a schedule for making such payments;
  - Specifies the purposes for which the HHDF may be used;
  - Provides for reporting requirements regarding the uses of HHDF by Health Homes.
- In addition the SPA:
  - Approved the extension of legacy rates through July 1, 2015.
  - Authorizes a flat outreach PMPM effective July 1, 2015.

# Calculation of PMPM Rate Add On

- As authorized by the Special Terms and Conditions (STCs) of the MRT 1115 State Waiver Amendment the Health Home PMPM rate add-on will be paid over three years:
  - ✓ August 1, 2014 to March 31, 2015: \$80 million
  - ✓ April 1, 2015 to December 31, 2015: \$66.7 million
  - ✓ January 1, 2016 to December 31, 2016: \$43.9 million
- The rate add-on will apply only to paid claims for outreach and engagement which have a corresponding segment in the tracking system/MAPP.
- The rate add-on is calculated by dividing the authorized payment amount by the total number of claims reconciled to the tracking system/MAPP for the applicable period.

# HHDF Payment Schedule

- Payments will be made through the Statewide Financial System (SFS) with a descriptor of “DSRIP-HH SFT 2014” – Health Homes will receive lump sum payments.
- Payments will begin March 2015 and will be made Quarterly through December 2016
- First payment (March 2015) has been processed and Health Homes should receive a check or e-pay this week.

Rate add on applied to claims with the following dates of payment	Rate Add-on Payment Date	Amount of Payment Authorized Under the SPA
8/1/14 to 2/28/15	March 2015	\$80 million
3/1/15 to 5/31/15	June 2015	\$22.2 million
6/1/15 to 8/31/15	September 2015	\$22.2 million
9/1/15 to 11/30/15	December 2015	\$22.3 million
12/1/15 to 2/29/16	March 2016	\$10.9 million
3/1/16 to 5/31/16	June 2016	\$10.9 million
6/1/16 to 8/31/16	September 2016	\$10.9 million
9/1/16 to 11/30/16	December 2016	\$11.2 million

# SPA Authorized HHDF to be Used for the Following Authorized Purposes

- ✓ **Member Engagement and Health Home Promotion**
- ✓ **Workforce Training and Retraining**
- ✓ **Clinical Connectivity and Health Information Technology (HIT) Implementation**
- ✓ **Joint Governance Technical Assistance**

# Authorized Funding Categories

## Member Engagement and Health Home Promotion

- Targeting strategies for conducting outreach to engage and enroll specific populations (e.g., HARP members, the homeless)
- Initiatives to improve communication and collaboration between DSRIP Performing Provider Systems (PPSs), hospitals, health care plans and Health Home care managers to facilitate alerts about emergency room and inpatient admissions
- Education Forums to educate consumers and families, the health care community, community providers and other social organizations about the purpose of Health Homes and how to access and make a referral to Health Homes
- Development of marketing materials, public service announcements, posters, and other educational tools
- Development of low literacy and multilingual educational resources for Health Homes and other cultural competency materials
- Consultation with literacy/multilingual experts to develop community engagement strategies



# Authorized Funding Categories

## Workforce Training and Retraining

- Support for training in care management, including training to understand the unique needs of patients with complex needs (e.g., medically fragile children, members with serious emotional disturbance (SED), members with serious mental illness (SMI) or substance use disorder, including those members enrolled in HARPs)
- On-line or on-site training opportunities that include how to use assessment tools (e.g., CANS, InterRAI)
- On-line or on-site training programs geared to individuals providing care management and other Health Home roles (e.g., patient navigators, peer supports)
- Cultural competence training
- HIT/EHR training for care managers to facilitate use of the Health Home supported HIT.
- Training to enhance the ability of care management agencies to coordinate care and develop care plans for individuals eligible for home and community based services (HCBS) that meet CMS requirements and that will be available Health Home members enrolled in Health and Recovery Plans (HARPs) (July 2105) and children (January 2106)
- Training for care managers on accessing and locating supportive housing and community supports and services
- Cross disciplinary training for care managers to expanding their clinical knowledge base and enhance their ability to serve a more clinically diverse population

# Authorized Funding Categories

## Health Information and Clinical Connectivity to Directly Advance Care Management

- Develop electronic interfaces for Care Management Application or Certified for Meaningful Use Electronic Health Record software between Health Homes and network partners and their local RHIO/QE/SHIN-NY
- Hiring IT consultant to assist Health Homes and network partners in development of the above mentioned interfaces
- Development of electronic interfaces between Health Homes and network partners and the Medicaid Analytics Performance Portal (MAPP)
- Development of shared Electronic Health Records with the capability of reporting evidence-based medical guidelines for population management (system acquisition should include interoperability considerations/standards)
- Purchase of Care Management Application or Certified for Meaningful Use Electronic Health Record software for Health Home and network partners
- Technical Assistance to assist designated lead Health Homes and network partners selecting and implementing Care Management Application or Certified for Meaningful Use Electronic Health Record software
- Purchase of electronic hardware (e.g., tablets/other portable electronic devices) to support utilization of Care Management Application or Certified for Meaningful Use Electronic Health Record software
- Development of HIT systems to ensure prompt payment of care management agencies

# Authorized Funding Categories

## Joint Governance Technical Assistance

- Costs of developing joint governance organizations to offset or replace the necessity for capital contributions from network partner organizations to support implementation and readiness activities
- Direct support to network partners to assist them in developing necessary administrative infrastructure
- Restructuring to align with Delivery System Reform Incentive Payment (DSRIP) initiatives
- Support for targeted local learning collaboratives to foster best practices to assist in the development of joint governance structures
- Quality improvement and quality assurance programs that will assist Health Homes with complying with reporting requirements and improving efficiency and member outcomes in their governance structure
- Transition to a network partner relationship with one or more Managed Care Plans.
- Network development to move beyond care management to functioning as an Accountable Care Organization for Medicaid members
- Collaboration with regional partners and stakeholders to identify service gaps and unmet needs that will inform governance strategies and network development
- Development of governance models that promote collaboration and participation of community based organizations
- Development of administrative infrastructure to ensure prompt payment of care management agencies

# Requirements and Procedures for Identifying and Determining Uses of HHDF

- All HHDF must advance the directives and requirements of the Health Home Program.
- HHDF must NOT duplicate or be used for purposes which other direct funding sources are available (e.g. DSRIP, other federal funding).
- Health Homes must consult with their downstream network partners (downstream partners may include care management agencies and providers of both health and administrative services) to identify appropriate uses of HHDF and will be required to report and document that collaboration.
- Health Homes are strongly encouraged to consult and develop plans with their PPS to use HHDF to align, enhance and support basic infrastructure development necessary to meet the objectives of one or more DSRIP projects and which otherwise would not be supported by direct DSRIP incentive payments.

# Requirements and Procedures for Identifying and Determining Uses of HHDF

- Health Homes may use a portion (no more than 30% of total HHDF payments) for the reimbursement of expenses previously incurred in the implementation of the Health Home program
- Health Homes that have questions regarding the appropriate use of HHDF for specific purpose may request a consultation with the Department by:
  - Sending an email to the Health Home web form (address on last slide)
  - Choose Subject: Health Home Development Fund
  - Include a Description of Proposed Use and Primary Contact
- Health Homes must file reports documenting the use of the HHDF

# HHDF should complement and align with DSRIP projects but must directly benefit the Delivery of Health Home Care Management – Example 1

## Example – Workforce Training and Re-training:

### DSRIP Funding

- Funding used for on-line or on-site training programs geared to individuals playing key implementation roles in all DSRIP projects to support workforce transition activities

### Health Home Funding

- Funding used for on-line or on-site training programs geared to individuals providing care management and other Health Home roles specific to providers within the Health Home (e.g., patient navigators, peer supports)

# HHDF should complement and align with DSRIP projects but must directly benefit the Delivery of Health Home Care Management – Example 2

## Example – Member Engagement and Promotion of Health Homes:

### DSRIP Funding

- Development of marketing materials, public service announcements, posters, and other educational tools regarding DSRIP and the PPS

### Health Home Funding

- Development of marketing materials, public service announcements, posters, and other educational tools specific to the Health Homes

# HHDF should complement and align with DSRIP projects but must directly benefit the Delivery of Health Home Care Management – Example 3

## Example – Health Information and Clinical Connectivity:

### ☐ DSRIP Funding

- Development of electronic interfaces between PPS and network partners and the Medicaid Analytics Performance Portal
- Funding can be used for:
  - Network formation
  - HIT capabilities
  - Network interoperability amongst partners



# HHDF should complement and align with DSRIP projects but must directly benefit the Delivery of Health Home Care Management – Example 3 (continued)

## Example – Health Information and Clinical Connectivity:

### ☐ Health Home Funding

- Development of electronic interfaces between Health Homes and network partners and the Medicaid Analytics Performance Portal.
- An entity may be both a network partner in DSRIP as well as a network partner in Health Homes
- Funding must be used for applications unique to the Health Home work in MAPP or otherwise, such as:
  - Development of IT systems to ensure prompt payment of Health Homes Per Member Per Month (PMPM) to downstream partners
  - Development of work assignment lists
  - Creation of interoperability between care plans
  - Analysis of Health Home performance data

# Reporting Requirements

- Health Homes must submit a preliminary report and semi-annual reports using forms provided by the Department (will be posted to Health Home Website along with this presentation).
- Reports must be submitted electronically (see address on last slide).
- A Preliminary Assessment of Uses of HHDF Report is due **May 1, 2015** and requires Health Homes to provide a preliminary assessment of how they plan to use the HHDF.
- The first semi-annual report will be due **September 1, 2015**.
  - ✓ Semi-annual reports shall be submitted until such time as it is verified that all funds have been used in accordance with authorized purposes.
  - ✓ Funds not used in accordance with approved purposes as defined herein or otherwise approved by the Department, will be recouped.

# Sample Reporting Templates: Preliminary Assessment Reporting Form

## Health Home Development Funds - Preliminary Assessment of Uses of HHDF Report

Report is Due May 1, 2015

Please submit report electronically to [healthhome2013@health.ny.gov](mailto:healthhome2013@health.ny.gov)

Please use this reporting form to report to the Department a preliminary assessment of how you anticipate your Health Home plans to use the HHDFs

Please include your approach to collaborating with downstream providers regarding anticipated uses

*Insert Health Home Name and Name, Telephone Number and E-mail Address of Primary Contact HERE*

Date Report Submitted

Title and Brief Description of Project/Initiative	Authorized Funding Categories				Estimated or Actual Total Costs of Project	Total Amount Spent Prior to August 1, 2014 to be Reimbursed by HHDFs	Describe how project will benefit network partners and anticipated process for collaborating and consulting with network partners on the use of funds	Describe how the use of funds are anticipated to support, align with or complement the objectives of one or more DSRIP projects selected by a PPS
	Member Engagement and Promotion of Health Homes	Workforce Training and Retraining	Health Information and Clinical Connectivity	Joint Governance Technical Assistance and Implementation Funds				
xx	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0.00	\$0.00		

# Sample Reporting Templates: Semi-Annual Reporting Form

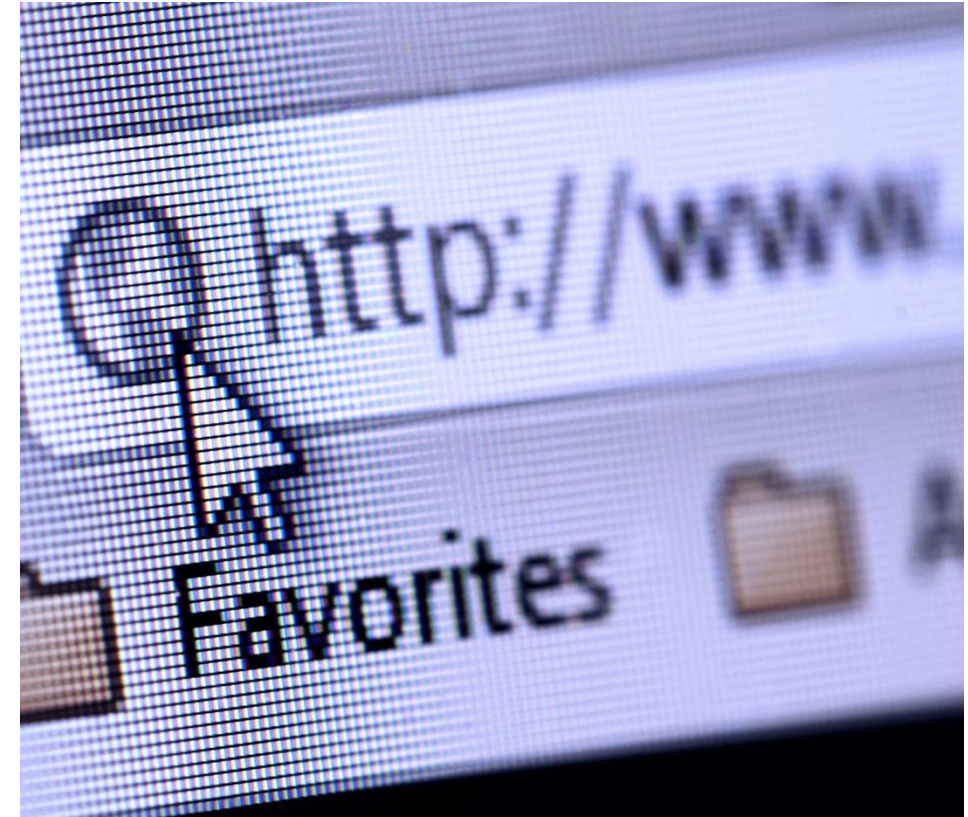
Health Home Development Funds-Semi-Annual Report											
Please submit report electronically to <a href="mailto:healthhome2013@health.ny.gov">healthhome2013@health.ny.gov</a>											
Insert Health Home Name and Name, Telephone Number and E-mail Address of Primary Contact HERE											
Semi Annual Report Due Date (9/1/15, 3/1/16, 9/1/17, 3/1/17) and Semi Annually thereafter until all HHDF Funds Expended										9/1/2015	
Date Report Submitted											
Total Amount of HH Development Funds Received to Date										\$0.00	
Total Amount of HH Development Funds Spent to Date (Not Including Prior Expenditures) (total should equal sum of column G)										\$0.00	
Total Amount of HH Development Funds Spent on Prior Expenditures (Prior to August 1, 2014) (total amount should equal sum of column G)										\$0.00	
Percent of Spending for Prior Expenditures to Total HH Development Funds (may not exceed 30% of all HHDF received)										#DIV/0!	
Report Check											
										\$0.00	
										\$0.00	
Title and Brief Description of Project/Initiative	Authorized Funding Categories				Estimated or Actual Total Costs of Project	Total Amount Spent Prior to August 1, 2014 to be Reimbursed by HHDFs	Total HHDF Spent on Project During Current Reporting Period	Total HHDFs Spent on Project After 8/1/14 and During Prior Reporting Periods	Total HHDFs Spent on Project to Date (NOT including Expenditures made prior to 8/1/14) (Column H-I)	Describe how project will benefit network partners and the process for collaborating and consulting with network partners on the use of funds	Describe how the use of funds support, aligns with or complements the objectives of one or more DSRIP projects selected by a PPS
	Member Engagement and Promotion of Health Homes	Workforce Training and Retraining	Health Information and Clinical Connectivity	Joint Governance Technical Assistance and Implementation Funds							
*****	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

# Due Dates for Submitting Required Reports

<b>Payment Date</b>	<b>Report Due Dates</b>
<b>March 2015</b>	May 1 (Preliminary Report) & September 1, 2015
<b>June 2015</b>	September 1, 2015
<b>September 2015</b>	March 1, 2016
<b>December 2015</b>	March 1, 2016
<b>March 2016</b>	September 1, 2016
<b>June 2016</b>	September 1, 2016
<b>September 2016</b>	March 1, 2017
<b>December 2016</b>	March 1, 2017 (and every six months thereafter until all funds received are documented to be expended)*

# Questions, Requests for Consultations, Report Submissions-Submit to the Health Home Email Web Form:

[https://apps.health.ny.gov/pubdoh/health\\_care/medicaid/program/medicaid\\_health\\_homes/emailHealthHome.action](https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action)



**Choose Subject “Health Home Development Fund”**