TECHNICAL ON-BOARDING PROCESS
TECHNICAL ON-BOARDING KICK OFF MEETING PRESENTATION FOR SCC PARTNERS

PRESENTED BY:

INFORMATION TECHNOLOGY TEAM
SUFFOLK CARE COLLABORATIVE

WWW.SUFFOLKCARE.ORG
Introductions to the SCC Information Technology Team

• Understand the role of the SCC IT Team.

Introduction to the Delivery System Reform Incentive Payment Program (DSRIP)

• Describe the DSRIP program’s purpose, goals and metrics.

Introduction to the Suffolk Care Collaborative (SCC)

• Understand the values and role the SCC plays in the DSRIP program.

Program Overview: Building an Integrated Delivery System

• Understand the vision in building an integrated delivery system, benefits and how “Big Data” is an essential element in integrated care delivery.

Describe the SCC Population Health Platform

• Understand the six applications used in the SCC Population Health Platform.

Technical On-Boarding Process

• Understand the 4 Steps in the Technical On-boarding process, timeline and deliverables at each stage in the process. In addition, preview Step 2 “Technical Deep Dive.”
The SCC IT Team are comprised of subject-matter experts to provide direction, guidance, technical support and help-desk support throughout the Technical On-boarding Process.

General Inquiries for Information Technology:
Suffolk_PPS_OnBoarding@StonyBrookMedicine.edu

SCC Information Technology Team:
Ned Micelli, Program Manager
Marleen Caplan, Project Manager
Harris Khan, Data Acquisition & Integration Specialist
Ritesh Patel, Sr. Integration Architect
Teena Muckadackal, Data Acquisition Analyst
Timm Taylor, Sr. Integration Architect
**PARTICIPATION IN DSRIP AT A GLANCE**

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<th><strong>DSRIP</strong></th>
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<td>• DSRIP, or Delivery System Reform Incentive Payment, is a CMS federally funded statewide initiative that aims to greatly improve the way medical care is delivered to Medicaid and uninsured patients by establishing a large network of collaborating healthcare providers called a Performing Provider System (PPS).</td>
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<td>• The Suffolk Care Collaborative (SCC) is the Performing Provider System (PPS) for Suffolk County under the Delivery System Reform Incentive Payment (DSRIP) program. The SCC has resulted from the recent partnership of thousands of healthcare delivery partners across Suffolk County, NY.</td>
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<th><strong>SCC Population Health Platform</strong></th>
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| • In order to achieve clinical data sharing and system interoperability across the PPS network each SCC partner will contribute Clinical, Admission Discharge Transfer (ADT) and Claims data to the SCC Population Health Platform.  

  • The SCC IT Team is responsible for working with each SCC partner to successfully integrate their EMR systems with the Population Health Platform. |
DSRIP  
**Delivery System Reform Incentive Payment Program**

- Five-year population-based health management program; year one began in April 2015
- $6.4B in total available to NYS through DSRIP
- Funding must be earned by meeting performance and outcomes measures (*State wide performance matters*)
- Information technology (interconnectivity) and expanded Care Management are critical to the success of the program
- Key theme is collaboration! Communities of eligible providers are required to work together to develop DSRIP Project Plans
State-wide Goals:

- Regionalize healthcare throughout NYS improving the way care is delivered to Medicaid and uninsured patients
- Transform health care delivery across the state by incentivizing PPSs to provide integrated, coordinated, and preventive health care.
- Reduce avoidable hospitalizations and ED visits by 25% over five years
- Reduce the overall cost of care by focusing on prevention and primary care ultimately keeping people healthy
- Risk stratify patients to provide the right level of care to the patient at the right time, at the right cost
State-wide Key Metrics:

• The State must meet statewide delivery system reform metrics.
• The majority of all specified individual project metrics must be met.
• Four measures are being used to evaluate DSRIP’s success in reducing preventable hospital utilization:
  ➢ Potentially Preventable ER Visits (PPVs)
  ➢ Potentially Preventable Readmissions (PPRs)
  ➢ Prevention Quality Indicators for Adults and Children (PQIs and PDIs)
• The State must show demonstrated progress toward ensuring 90 percent of managed care payments are value-based by the end of the five year demonstration period.
Our vision to become a highly effective, accountable, integrated, patient-centric delivery system has positioned us well to make an important contribution to the DSRIP program.

Some of the many goals will include the capacity to enhance patients' self-care abilities, improve access to community-based resources, break down care silos and reduce avoidable hospital admissions and emergency room visits.
Suffolk PPS Population Health Platform
Building a Suffolk County Integrated Delivery System

In order to achieve clinical data sharing and system interoperability across the PPS network each contracted SCC partner is asked to contribute Clinical, Admission Discharge Transfer (ADT) and Claims data to the SCC Population Health Platform.

The SCC Information Technology Team is responsible for working with each engaged SCC Coalition Partner to successfully integrate their EMR systems with the Population Health Platform through a “technical on-boarding” process.
PROGRAM OVERVIEW:
BUILDING AN INTEGRATED DELIVERY SYSTEM

All SCC partner providers will be included in the Integrated Delivery System. The IDS will include medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network.
What is the value of the Integrated Delivery System?

- Build a Population Health Management platform for the SCC
- Big data helps understand trends across the integrated delivery system to reduce and/or avoid potentially preventable inpatient and ED visits
- Reports generated can help your efforts in the INTERACT program in collaboration with your hospital partners
- Upon completion of technical on-boarding, your interface will remove the requirement for you to manually submit Domain 1 Patient Engagement Data via BOX to the SCC.
- Upon completion of technical on-boarding, your interface will also complete your DSRIP requirement to connect to a RHIO.
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<th>Application</th>
<th>Description</th>
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<td>HealtheIntent</td>
<td>• Foundation platform that receives all data from PPS Coalition partners and the DOH.</td>
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<td>HealtheRegistries</td>
<td>• Chronic condition and wellness registry solution, which leverages clinical, claims and operational data across disparate sources and normalizes the data into meaningful information.</td>
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<td>HealtheAnalytics</td>
<td>• Reporting tool that supports Business Objects and Tableau.</td>
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<td>HealtheEDW</td>
<td>• Powered by the HealtheIntent platform, which aggregates data (clinical, claims and operational) across multiple disparate sources and normalizes the data. HealtheEDW allows organizations to review current performance, historical trends, benchmarks and other analytics capabilities that provide input into continual process improvement initiatives.</td>
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<td>HealtheCare</td>
<td>• Care Management tool linked with HealtheIntent for DSRIP care managers and care management services.</td>
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<td>Patient Connect</td>
<td>• A mobile application that acts as a collaboration tool between the SCC Care Manager and the patient. SCC Care Managers use the application to invite patients to review their HealtheRecord, receive alerts and review educational material. The application can also be used to integrate with and display results from home monitoring used by the patient.</td>
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LOGICAL OVERVIEW:
BUILDING AN INTEGRATED DELIVERY SYSTEM
Data Acquisition

**SCC Population Health Platform:** (Clinical & Claims)

- 2 years historical flat files.
- Daily flat files going forward.

**RHIOs:** (Clinical)

- HL7 or CCD or CCDA going forward only.

(LOGICAL OVERVIEW AND DATA FLOW
SCC POPULATION HEALTH PLATFORM)

(SCBUH HUB ONLY)
Key Data Items:
- OID
- Gender
- DOB
- SSN
- Address
- Email
- MRN
- First name
- Last name
- Full Middle Name

Clinical Data
- 2 years historical flat files.
- Daily flat files going forward.

Claims Data
- 2 years historical 837s or claims flat files.
- 837s or claims flat files going forward.

HL7/CCDA
- Going forward for RHIO & HIE (if applicable).

Click here for the full Suffolk PPS Interface Specifications
https://suffolkcare.org/forpartners/information-technology
Examples of Flat Files that are required for the DSRIP program:

- Person Demographics
- Person Provider
- Person Benefit Coverage
- Encounter
- Encounter Provider
- Encounter Benefit Coverage
- Diagnosis
- Procedure
- Results
- Problem
- Medication
- Immunization
- Risk Score
- Questionnaire
- External Measures Outcomes
- Care Plan
- Claim Header
- Claim Detail
Example of HL7 Messages/Segments that are supported for RHIO

- ADT – Admit, Discharge, Transfer
- ORU – Observation Result
- PPR – Patient Problem
- SCH/SIU – Schedule
- VXU – Vaccination
- CCDA
How will Technical On-boarding be completed?

1. Technical On-boarding Kick off Meeting Held
   - SCC IT Team will be reaching out to your IT Contacts to schedule a Kick-off
   - Confirm IT Project team Members
   - Review high level methods of work – determine EMR vendor contacts
   - Education on Interface Specifications
     - [http://www.suffolkcare.org/forpartners/information-technology](http://www.suffolkcare.org/forpartners/information-technology)
   - Discuss proposed Project Timeline

2. Technical Deep Dive Meeting(s) with IT Contacts
   - Answer any technical data analysis and data mapping questions
   - Review provider specific network connectivity fact sheet which outlines VPN, IP Addresses, SFTP details
   - Potentially several meetings are required until Step 2 is complete
   - Target Milestone: Provider Ready to Test
3. Provider Interface/Data Testing Started
   - Assure production level secure network connectivity is established
   - Validate all supported Data Messages Flat files, HL7, CCDA and Claims as applicable
   - Finalize support model and identify support contacts
   - Schedule go-live date for Population Health Platform & RHIO
   - Potentially several meetings are required until Step 3 is complete
   - Target milestone: Provider Ready to Go live into Production

4. Transition Interface(s) into Production
   - Schedule & Coordinate with IT Contacts go-live Conference call
   - Review log files assure data messages are being successful
   - Validation -- (If applicable) could occur over several days
   - Inspect registries to assure that providers data is successfully filing in SCC Population Health Platform
   - Initial Quality Assurance Completed
   - Target milestone: Provider submitting live transactions in production
Suffolk Care Collaborative

ASPIRATIONAL PROJECT TIMELINE
TECHNICAL ON-BOARDING PROCESS

Weekly Team Updates

Kick Off
Technical Deep Dive & QA
Data Extraction & Interface Build
Data Validation, Mapping & Testing
Go-Live
Monitor
Hand Off to Support

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IMMEDIATE NEXT STEPS: TECHNICAL ON-BOARDING PROCESS

- Build a Communication Plan
  - Identify IT contacts and project team members
    - Name, Title
    - Role (responsibility/function)
    - Telephone, Email
    - Provider Affiliation (Internal, vendor, etc.)

- Determine EMR vendor participation where applicable

- On-Boarding distribution list for all communications: Suffolk_PPS_OnBoarding@StonyBrookMedicine.edu

- Schedule Next Meeting: Technical Deep Dive
Technical Deep Dive (Preview)

Are any of the following patient information contained in a single product or multiple ancillary systems?

- Medication
- Lab Results
- Medical Claims
- Immunizations
- Allergies
- Diagnosis Codes
- Procedures/Orders
- Results (non-lab)
- Care Plans
- Appointments/Encounters/Visits

- Codes that identify procedures, diagnosis, medications must be defined or standardized
- Patient Financial Class is a critical component for identifying Medicaid patients. In the specs this is reflected in the Encounter file. This identifier may change from encounter to encounter depending on the current state of insurance coverage at the time of the visit.
- How are scanned test results documents handled? Is that data available as discreet data elements?
FOR MORE INFORMATION:

General NYS DSRIP Information:
New York State Department of Health DSRIP website:
https://www.health.ny.gov/health_care/medicaid/redesign/delivery_system_reform_incentive_payment_program.htm

Suffolk Care Collaborative:
www.SuffolkCare.org

SCC Technical Specifications:
https://suffolkcare.org/forpartners/information-technology

SCC IT Team E-Mail:
Suffolk_PPS_OnBoarding@StonyBrookMedicine.edu
Questions & Answers

Thank you!