



## **CBHS IPA Newsletter**

**October 25th, 2019**

*General Edition*



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We are hoping to make this a monthly newsletter coming out around the middle of each month. That is an aspiration. Please don't hold us to an exact date.

## **In the News:**



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*By Richard Tuten, Esq., CEO of CBHS IPA.*

## **CYBER SECURITY**

### **3 AL Hospitals pay Ransom to Hackers**

A 3 hospital system in Alabama has paid ransomware attackers to regain control of its IT system. The attack caused the hospitals to close to new admissions for one week. Please click [here](#) to read more!

*Ransomware Hostage Rescue Manual - Download*

Please click [here](#) to read the Ransomware Hostage Rescue Manual! Keep your agency, your clients, and their data safe!

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## **VALUE BASED CARE**

**Recent study shows one quarter of healthcare spending is wasteful.** This highlights the need to move to value based contracting: "Healthcare spending is on an unsustainable trajectory, CMS actuaries [found](#) earlier this year. They estimated that national healthcare spending will increase 5.5 percent annually from 2018 to 2027, accounting for over 19 percent of gross domestic product (GDP) by the end of the period." Please click [here](#) to read more!

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### **Feds have proposed changes to Stark and Anti-Kickback rules to spur move to value based payments.**

" Hoping to stimulate more interest in value-based care models, HHS issued much-anticipated reforms to self-referral and anti-kickback rules. But experts cautioned that the industry is a long way from fully embracing risk-based arrangements." Although the changes are helpful these rules are not the only impediment to moving from volume to value. Please click [here](#) to read more!

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## **TELEMEDICINE:**

Is Telemedicine gaining traction? Nearly two dozen senators have asked HHS Secretary Alex Azar to find opportunities in existing Medicare and Medicaid policies to provide long-term sustainability for Project ECHO telemedicine programs. Please click [here](#) to read more!

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## CONTRACTING

### Value Contracting Basics (Issue 2)

Last month in the first column in this series, we looked at the definition of Value (Quality divided by Payment), and Quality. The second in our series of continues the discussion by looking at the denominator: Payment. We will also look at six basic compensation models.

What is “Value Payment”? Like Quality, Payment depends on point of view. Is it the amount charged by a service provider for the service or is it the actual cost of the service to the provider? Is it the amount paid by the payor (MCO or MSO) to the service provider for a service? For the MCO relationship with the MSO (the entity taking financial risk) Payment is the premium paid. For the MSO relationship with the service provider it is the amount of money paid for a specific service or bundle of services.

But what is Payment to the client? Is it their co-pay? Their premium? Does it include the physical costs? The costs of getting to the service? The cost of other services they receive because they did not receive a service when and where they needed? In short: Yes. It is all of those at different times and for different services and for different clients. We as the providers need to be aware of the total cost of the care provided. If we as providers work collaboratively to provide the right service, in the right amount, at the right time, in the right location, in the right manner, we can deliver the lowest Payment service.

Ultimately this becomes a contractual definition. We can agree to set “Payment” as the allowable rate charged and paid for a specific service. Or we can get creative (but that is for next month when we discuss bundled payments.)

That presents the complexity of defining Value: define Quality; then define Payment. So now let’s look at the approach to how to compensate providers for services rendered.

Payment Methodologies. All methodologies have advantages, disadvantages, regulatory problems, provider relation problems, etc. As methodologies continue to evolve, choosing which methodology is best in any given situation is more of an exercise in which is least problematic. We will discuss these next month.

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# Chief Clinical Officer (CCO) Report:

## CCO October Report



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*By Mark Sasvary, CCO of CBHS IPA.*

Fall had a late start but it is moving at a cheetah's pace. Some part of the Hudson Valley are past their peak foliage, but please make sure to grab some cider donuts. And like this Autumn rapidly giving way to winter, CBHS is moving full speed ahead on a multitude of projects. We presented our referral call line & e-referral system to the Highland Medical Group (Montefiore) last month in Nyack, both of which were well received and resulted in great feedback for us!

Through our referral call line, our Care Connections Specialists have received inquiries for services directly from clients. And we appreciate our member agencies' assistance and cooperation in connecting clients to these essential services. We hope to expand our Care Connection work to other practices, sites, and departments in the coming months. CBHS is planning to open the Care Connection system to our member agencies to link member agencies and clients to services within our network in the near future.

With the possibility of DSRIP's renewal on the horizon, CBHS has begun a dialogue with our partner provider systems. We look forward to new opportunities to work with them on innovative projects such as the Transitions of Care Wellness Program (ToCW). In the meantime, we continue to work on enhancements that will foster sustainability and improved outcomes.

In collaboration with the HCBS Oversight Committee and our members and affiliates, we are making progress on the HCBS Infrastructure Grant. While the project continues to pose unique challenges, we are taking important steps forward. We finalized our tracking forms and our plans for distribution of funds, of which we will be distributing to participating agencies within the next few weeks. We are developing technological solutions to help agencies locate difficult-to-find clients and to help them process assessments more efficiently. CBHS will also create solutions for our referral and Care Connection systems, which will be a great tool to get clients connected to HCBS. And, they will also help with the referrals we process for providers within and outside our



network.

The CBHS Quality Oversight Committee (QOC), Steering Team, and Subcommittees are making great progress as we continued to develop our Standards of Care. These standards will be a crucial step towards clinical integration. We also formed our new Children and Youth Subcommittee which will be a great asset to the QOC overall. CBHS also started to share important metric and workflow information with our partners at [CBC](#) as part of our work. We have also scheduled the first appointments for our Performance Enhancement Program, and we look forward to learning from our member agencies and sharing what we learn with our member agencies to improve the system of care across our network.

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## ODDS & ENDS:

### SAVE THE DATE!

#### CHCANYS: NY Medicaid Population Health Symposium:

Monday, November 18th to Tuesday, November 19th

Grand Hyatt Hotel, NY, NY

[Click here to register!](#)

#### Guest Speakers (left to right):



**SANDRO GALEA, MD, MPH, DRPH** - DEAN AND ROBERT A. KNOX PROFESSOR, BOSTON UNIVERSITY  
SCHOOL OF PUBLIC HEALTH

**REBECCA ONIE, JD** - FOUNDING PARTNER, THE HEALTH INITIATIVE

**ROCCO PERLA** - FOUNDING PARTNER, THE HEALTH INITIATIVE

#### Event Description:

*"The Department of Health will be hosting the NY Medicaid Population Health Symposium at the Grand Hyatt in New York City on November 18-19. The symposium will provide a forum to share the perspectives and insight of the DSRIP Performing Providers Systems, Physical and Behavioral Health Providers, Managed Care Organizations, and community organizations addressing the Social Determinants of Health," (event description, [CHCANYS.org](#).)*

[Click here to register!](#)

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**ATTENTION!!! CBHS Pet(s) of the Month:**



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**WE NEED MORE PETS, PLEASE!**

We are looking for more 4 legged (or gilled or feather or scaly) family members for the CBHS Family Pet of the Month! Please tell us their name, their breed, their age and their hobbies! Send all pictures and bios to [newsletter@cbhsinc.org](mailto:newsletter@cbhsinc.org).

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**Calling All CBHS Artists!:**



**CBHS would like to thank Rehabilitation Support Services in Goshen for donating several beautiful pieces to our donation drive!**

We are still looking for art made for our agencies' clients! We would love to decorate our walls with their creations to pay tribute to all of the wonderful work our agencies and their clients do.

Please let us know if you would like to donate or if CBHS can purchase any client art through your agencies by contacting via email to [newsletter@cbhsinc.org](mailto:newsletter@cbhsinc.org).

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### **CBHS BHCC PET of the Month**

We're happy to introduce Sammy "Sam" Darrow! He is an 8 year old American Bulldog Mix and a trained therapy dog! He works with his mother - HDSW's Chief Program Officer Kelly Darrow. Sammy also loves to watch the neighborhood kids from his bay window seat and let his mom know if anyone is misbehaving!