

Background

The Delivery System Reform Incentive Payment (DSRIP) program, part of the State of New York Medicaid 1115 Waiver, ended in March of 2020 and Care Compass Network (CCN), one of 25 Performing Provider Systems (PPS) in New York, needed to develop a sustainable business model leveraging infrastructure developed with DSRIP dollars. CCN saw an opportunity in significant investments they had made in Community-based Organizations (CBOs) in areas such as quality improvement initiatives, value-based payment (VBP) education, innovation fund projects, workforce development, and more. A key differentiator for CCN in the regional market was the relationships with CBOs that it had cultivated into a robust network that could address social determinant of health (SDoH) barriers and thrive in VBP arrangements.

CCN's strategic objectives for the engagement were to:

- Understand and prioritize CBO network related service offerings to develop business model options.
- Leverage existing DSRIP-funded program infrastructure and CBO relationships.
- Develop a sustainable business model that will impact quality and value-based payment (VBP) arrangement performance for payers and providers.

In June 2019, COPE Health Solutions was contracted by CCN to provide strategic and business planning support and expert technical assistance to guide them as they worked towards achieving these objectives.

CCN engaged COPE Health Solutions (CHS) to assist in its strategic and business planning efforts because of our firm's deep expertise in Medicaid 1115 and other waiver programs, VBP, strategic planning, and management services organization (MSO) strategy and operations. The COPE Health Solutions engagement team was responsible for delivering a set of options and a recommendation on a future state structure and service offerings that CCN should prioritize for what would become a new Social Care IPA.

The CHS team shared a range of expert advisory and best practice models for CBO engagement and contracting, priority metrics, VBP requirements, MSO service offering options, and key regional and state market trends. A gap assessment of CCN's current MSO-like service offerings was undertaken. An options analysis was developed with recommendations across a range of critical areas, including revenue models, required competencies for each service offering, and legal structures to ensure success. The CHS team also developed a high-level workplan to stand up the new business and entity, key performance indicator metrics, and perform additional analyses.

Outcomes

Since completion of our engagement, CCN has incorporated several of CHS' recommendations into the development of the business model for the Social Care IPA, recently gaining state approval for the operation of the IPA. The Care Compass Supporting-IPA (CCS-IPA) will provide administrative, network management, contracting support, and facilitating performance management to their network of CBOs and small independent medical providers, enabling the provision of high value services to contracted Managed Care Organizations (MCOs) and other VBP lead entities in VBP arrangements.

CCN is at the forefront of the national health care market trend in the New York State Southern Tier region, to integrate social and clinical care offerings and is well positioned for the overall market transition to VBP as well as the forthcoming New York 1115 Medicaid Waiver Demonstration. One of the key strategic goals of this 1115 Medicaid Waiver Demonstration proposal will be to focus on advancing VBP arrangements.



Broader Applicability

With the DSRIP program having come to an end in New York State and a new Medicaid Waiver Demonstration awaiting approval from CMS, it will be important for organizations that will be petitioning the state to be lead entities under the new Medicaid Waiver Demonstration to develop and implement business models and services that both support VBP arrangement success and align with the upcoming new NYS 1115 Medicaid Waiver Demonstration Proposal. Beyond New York State, the integration of SDoH as a focus of success in VBP arrangements is now seen in the new ACO REACH model, California's new CalAIM model and others nationally.

COPE Health Solutions' unparalleled national expertise in VBP, population health, 1115 Medicaid Waiver and CMS VBP programs, and MSO strategy and operations can help clients develop a tailored strategic business and operational plan. Our team of subject matter experts in VBP contracting, financial modeling, network development, care models, population health analytics, and strategy enables a collaborative approach with providers and payers to ensure success in current and new VBP and population health management-related businesses.

"COPE Health Solutions supported our IPA through pivotal leadership and business model changes, providing critical expertise, interim management, analytics and other MSO service support, helping put us on track to be the preferred IPA/CIN in Western NY for physicians and payers."



Mark Ropiecki
Executive Director
Care Compass Network

