

# AHI PPS

TRANSFORMING  
the APPROACH  
to HEALTH CARE



Behavioral Health

Long Term Care

Hospitals

Public Health

Community Based Services

Primary Care

Home Health

## DSRIP News

July 29, 2016

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### New AHI PPS Partner Career Opportunities Web Page Published

To provide a convenient, one-stop resource for job seekers in our region, we have created a new page on the AHI website with a list and links to career opportunities web pages of all AHI PPS Partners that have such pages.

Visit [AHI PPS Partner Career Opportunities](#).

If you are an AHI PPS Partner and have a career opportunities page on your website you'd like us to add to the list, please email the link to [communications@ahihealth.org](mailto:communications@ahihealth.org).

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## **Medical Record Review Notification**

The New York State Department of Health (DOH) and the DSRIP program's independent assessor have partnered with Verisk Health, Inc. to complete chart abstractions for all PPSs participating in Delivery System Reform Incentive Payment (DSRIP) Domains 2 and 3.

The medical record review will require the abstraction of data to populate six HEDIS measures (controlling high blood pressure, comprehensive diabetes care, prenatal and postpartum care, frequency of ongoing prenatal care, childhood immunization status, and lead screening in children) and one New York-specific non-HEDIS measure (screening for clinical depression).

Verisk Health Inc., will begin contacting providers shortly after Wednesday, August 10, 2016, to begin scheduling appointments for record collection services.

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## **Initial Opioid Prescribing Limited to a Seven-Day Supply for Acute Pain**

In response to the growing local and nationwide opioid epidemic, New York State recently passed a law to further reduce overprescribing of opioid medications. The new legislation, effective July 22, 2016, states that initial opioid prescribing for acute pain is limited to a seven-day supply.

A practitioner cannot prescribe more than a seven-day supply of an opioid medication for acute pain upon initial consultation. However, there are a few exceptions to the new regulation. According to the NYSDOH, "This rule shall not include prescribing for chronic pain, pain being treated as a part of cancer care, hospice or other end-of-life care, or pain being treated as part of palliative care practices." Following a patient's initial visit to their physician for the same acute pain, the practitioner may issue any appropriate renewal, refill, or new prescription for an opioid.

For further details, please refer to the [July issue of the NYS Medicaid Update](#).

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## **Using Learning Communities to Support Innovation Adoption Webinar August 25**

Join the Health Care Innovations Exchange for a free web event designed to share results and lessons from the Innovations Exchange's Learning Communities initiative. The webinar will be taking place at 1:30—3:00 p.m., Thursday, August 25.

Over the past few years, the Innovations Exchange sponsored three Learning Communities (LCs) to support innovation adoption in the following high-priority areas: Advancing the Practice of Patient- and Family-Centered Care in Hospitals (Florida); Reducing Non-Urgent Emergency Services (Detroit); and Promoting Medication Therapy Management for At-Risk Populations (Houston).

The event will present an overview of the activities and results of the three LCs; provide insights about factors that influenced innovation adoption and implementation; and share lessons learned in using LCs as a method to implement innovations to improve quality. A leader, or "champion," from each LC will present highlights about the learning community experience. This Web event is presented in collaboration with AcademyHealth.

[Register](#) for the webinar.

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## Four Winds Hospital Now Connected to Hixny

Four Winds Hospital is now connected to Hixny, making the psychiatric care facility's vital patient information available through the health information exchange. The facility, in Saratoga Springs, connected to the health information exchange in early June. Furthermore, it is the first psychiatric facility to be connected via the exchange.

Addressing the Medicaid population with behavioral health issues is a key component of DSRIIP, because this population has been shown to have a higher degree of avoidable hospital use.

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## Study Finds Medicaid Expansion Positively Impacts Many Hospitals

A recent study completed by the Georgetown University Center for Children and Families and the Georgetown University Health Policy Institute compared the impact of Medicaid Expansion at health care institutions in expansion vs. non-expansion states. The study found that hospitals and federally qualified health centers (FQHCs) concluded financial improvements in expansion states fared better on average. The decrease in the number of uninsured has also decreased the level of uncompensated care at safety net hospitals in these states. In addition to increased financial well-being, expansion states have increased access to care, initiated new community efforts to integrate care, and new programs to expand access to specialists.

Read [\*Beyond the Reduction in Uncompensated Care: Medicaid Expansion is Having a Positive Impact on Safety Net Hospitals and Clinics.\*](#)

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## DOH Holding Statewide Health Care Facility Transformation Program RFA Webinar August 8

DOH will hold an Applicant Webinar from 1:00—2:30 p.m., Monday, August 8, to review key aspects of the Statewide Health Care Facility Transformation Program (SHCFTP) Request for Applications (RFA) released last week.

[Register](#) for the webinar.

On July 20, the NY State Department of Health and the Dormitory Authority of the State of NY announced funds are available for the Statewide Health Care Facility Transformation Program. A total of up to \$195 million is available under the program through a Request for Applications (RFA) to health care providers that are deemed by the Commissioner of Health "to fulfill or will fulfill a health care need for acute inpatient, outpatient, primary, home care or residential health care services in a community." Another 30 million has been set aside for community-based health care providers such as mental health and substance abuse clinics, home care clinics, and diagnostic centers.

The main objective of the Statewide Health Care Facility Transformation Program is to provide grant funding to health care providers who are primarily interested in executing capital projects. Eligible applicants must demonstrate how the

use of the grant will strengthen and protect continued access to health care services in their community and support DSRIP program principles to achieve the Triple Aim.

If interested, more information regarding the Statewide Healthcare Facility Transformation Program RFA can be accessed through [NYS DOH](#). Information can also be accessed through [Grants Gateway](#). Applications must be submitted in Grants Gateway by 4:00 p.m., Friday, September 16, 2016.

Questions regarding the Statewide Health Care Facility Transformation Program (RFA #1607010255) can be e-mailed to [healthcarefacilitytransformation@health.ny.gov](mailto:healthcarefacilitytransformation@health.ny.gov).

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## **Reminder: DSRIP Project 3.a.i Behavioral Health Licensure Thresholds**

A provider licensed under Article 28 and offering mental health services does not also need to be licensed under Article 31 by OMH unless more than 10,000 annual visits are for mental health services or more than 30 percent of its total annual visits are for such services.

A provider categorized as “non-DSRIP” may opt to pursue the integration of primary care, mental health, and/or substance abuse services by obtaining a separate license from each respective agency - DOH, OMH, and OASAS. However, under DSRIP, up to 49 percent of total patient visits of non-licensed services are permitted without requiring an additional license.

For these licensure thresholds to apply, the provider must be participating in the AHI PPSs [DSRIP Project 3.a.i](#). In addition, a practice must submit a DSRIP Integrated Services Application, available on the [DOH website](#), in order to integrate services.

For more information, check out [Integrated Services Overview](#), a PowerPoint slide deck recently published by the DOH.

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## **AMA Webinar Reminder - Culture by Design: Reducing Physician Burnout Through Leadership**

Leadership by physicians is needed during this era of health care transformation. However, physicians are not always prepared to take a leadership role in health care reform due to doctor burnout occurring across the nation.

The AMA is offering a free webinar, “Culture by Design: Reducing Physician Burnout Through Leadership,” from 1:00—2:00 p.m., Thursday, August 11.

The webinar will cover the causes of physician burnout, and hence propose solutions to mitigate the burnout epidemic.

[Register](#) for the webinar to join the AMA discussion.

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## Health Care News and Resources

Please visit [Health Care News and Resources](#) for national, regional and local health care news and resources that may be relevant to your work.

If you have articles and resources to share, please forward to [communications@ahihealth.org](mailto:communications@ahihealth.org).

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