



Phase 2 Funds Flow Distribution Procedure and Payment Schedule

Distribution Logic

1. Each project is weighted based on the valuation determined by NYS DOH to determine the percent of total incentive funds that will flow to participants of each project. The incentive dollars available for each project is then divided over the remaining Demonstration Year's (DY) as it correlates to the total incentive dollars budgeted each year for an estimate of the incentive dollars paid out each year for each of the projects.
 - a. NOTE: the DY totals may alter slightly to accommodate for larger incentive payments in DY 2-3 for 2.a.ii due to the completion requirements for PCMH however this will not change the total incentive dollars allocated to each project.
2. The participants in each project are identified at a SITE level, tied to their entity.
3. The sites are then split between safety net and non-safety net as their ENTITY is classified. The non-safety net providers will receive 10% of the incentive dollars allocated, not to exceed 5% of the total DSRIP valuation.
4. Within each classification of provider (i.e. safety net), the provider types are categorized (i.e. Behavioral Health, Health Home, Hospital, etc.).
5. The Medicaid impact measure is determined.
 - a. Safety net partners who bill Medicaid: based on the number of billable visits in the prior calendar year.
 - b. Non-safety net and safety net partners who do not bill Medicaid: based on size in terms of number of employees serving the PPS region.
 - c. EXCEPTION: All county Public Health agencies will be based on county population
6. Medicaid impact is used to determine a percent impact of each site as it relates to other sites of the same provider type within that classification.
 - a. NOTE: sites in multiple PPS's divide their Medicaid impact by 2
 - b. EXCEPTION: Project 2.a.ii will pay out for patient engagement and pay for performance each year as well as a lump sum payment once PCMH recognition is reached.
7. Within each classification of provider (i.e. safety net), the categorized provider types are given a weighting based on their anticipated impact to the project.
 - a. The ratios are determined by the oversight committee of each project.
8. The funds flow to each provider type within each project will be the total amount of incentive funds for that project, within that classification of provider, multiplied by the percent weighting given to that provider type.
9. The funds flow to each site within the provider type will be the Medicaid percent impact multiplied by the total from above.
10. Incentive dollars will be distributed for process, patient engagement, and pay-for-performance measures. Dollars will only be distributed for patient engagement and pay-for-performance if the PPS as a whole meets the requirements.
 - a. Pay for Process dollars for Phase 2 funds flow are only for PCMH recognition (Project 2.a.ii).
 - b. Patient engagement incentive dollars will be distributed to all PPS Partners active within the applicable projects. Should a partner be required to submit patient engagement numbers and fails to do so within 15 days past the quarter end date, that partner will not be eligible for this portion of incentive dollars.
 - c. Pay-for-performance incentive dollars will be distributed to all PPS Partners active within the applicable projects.
 1. Active project participation is defined as up-to-date completion of webforms in accordance with the Incentive Payment Schedule.
 - d. NOTE: Should a partner have justification as to why they cannot meet the above criteria, they are able to submit a DSRIP Partner Remediation Form to qualify for payment. This form must be approved by the Project Lead and Project Management Office within 30 days of the quarter end date.
11. The methodology for Phase 2 Funds Flow may be further enhanced with approval from the NCI DSRIP Finance Committee and NCI Board.



Incentive Payment Schedule

1. PCMH Recognition Incentive Payments will be made within two weeks of the date the NCI PMO receives documentation of certification.
2. Pay-for-Performance payments will be made in-line with the payment schedule defined by NYS DOH. Payments will occur only if the PPS as a whole meets the requirements. The below table reflects the payment schedule from NYS to the PPS and the PPS to our Partners.

DY	Quarter	Webform Submissions (Quarter End Date)	State Approval	NYS to PPS Payment	Target PPS to Partner Payment
2	1	6/30/2016	9/29/2016	1/29/2017	2/10/2017
	2	9/30/2016	12/30/2016		
	3	12/31/2016	4/1/2017	7/29/2017	8/11/2017
	4	3/31/2017	6/29/2017		
3	1	6/30/2017	9/29/2017	1/29/2018	2/9/2018
	2	9/30/2017	12/30/2017		
	3	12/31/2017	4/1/2018	7/29/2018	8/10/2018
	4	3/31/2018	6/29/2018		
4	1	6/30/2018	9/29/2018	1/29/2019	2/15/2019
	2	9/30/2018	12/30/2018		
	3	12/31/2018	4/1/2019	7/29/2019	8/9/2019
	4	3/31/2019	6/29/2019		
5	1	6/30/2019	9/29/2019	1/29/2020	2/14/2020
	2	9/30/2019	12/30/2019		
	3	12/31/2019	4/1/2020	7/29/2020	8/14/2020
	4	3/31/2020	6/29/2020		

Committee/Board	Date	Revision 1	Revision 2	Revision 3
NCI DSRIP Finance Committee Approval	2/23/16	3/22/16	7/26/16	10/25/16
NCI Board Approval	3/2/16	4/6/16	8/3/16	11/2/16