

**New Jersey Delivery System Reform Incentive Payment (DSRIP) Program
Frequently Asked Questions (FAQs)**

Document Purpose: This FAQ document is prepared in support of Delivery System Reform Incentive Payment (DSRIP) Program as described in the New Jersey Comprehensive Demonstration Waiver. This document is a living document and is subject to change as additional questions are added and as changes/clarifications to the program are made. If you have a question that is not addressed within this document, please send your question to: NJDSRIP@mslc.com or NJDSRIP@pcgus.com.

Ref #	Category	Question	Response	Date
1	Progress Reports	When is the DY7 Progress Report 1 due?	The DY7 Progress Report 1 is due October 31, 2018. This is incorrectly noted in the current version of the Funding and Mechanics Protocol (FMP), but a notice of erratum has been posted on the website.	5/24/2018
2	Progress Reports	When is the DY7 Progress Report 2 due?	The DY7 Progress Report 2 is due April 30, 2019. This is incorrectly noted in the current version of the Funding and Mechanics Protocol (FMP), but a notice of erratum has been posted on the website.	5/24/2018
3	Project Management	What's the latest email we should be using?	For any questions related to DY7-DY8, including questions about measures and about DY7 renewal applications, please email NJDSRIP@pcgus.com . Any questions related to DY6 or prior demonstration years should be directed to NJDSRIP@mslc.com .	5/24/2018
4	DY7-8 Performance Measures & Reporting	When and how are DY7 & DY8 measures to be submitted to PCG?	Starting in DY7, measures are to be reported annually. The measures will be due on April 30, 2019 (DY7) and April 30, 2020 (DY8). Hospitals will continue to use the Standard Reporting Workbook (SRW) to submit measures to PCG.	5/24/2018
5	DY7-8 Performance Measures & Reporting	When will the measure specifications for DY7 and DY8 (Databook) be shared with hospitals?	These measures are still pending CMS approval. The Databook will be available once we have received final approval from CMS.	5/24/2018
6	DY7-8 Performance Measures & Reporting	In DY7 and DY8, will there only be annual data reporting?	Yes, starting in DY7 through DY8, all measures will be reported annually.	5/24/2018
7	DY7-8 Performance Measures & Reporting	Have the measure changes for DY7 & DY8 been approved- by CMS?	CMS is still in the process of reviewing the measure changes for DY7 & DY8.	5/24/2018
8	DY7-8 Performance Measures & Reporting	Will the SRW given to us by the State have the prompts for all the data we must report in DY7 and DY8?	Yes, the SRW will be given to hospitals by the State, and it will include the prompts for reporting all the data required in DY7-DY8.	5/24/2018
9	DY7-8 Performance Measures & Reporting	What will be the baseline for the EITGs for measures in DY6, DY7, and DY8?	The baseline for the DY6 UPP measures will be changed from 2014 performance to 2016 performance. The baseline for DY7 and DY8 UPP measures will be decided at a later date.	5/24/2018
10	DY7-8 Performance Measures & Reporting	Some measures were not risk adjusted because of the switch from ICD-9 to ICD-10. Will future measures be risk adjusted?	At this time, there is no plan to risk adjust measures in DY7 and DY8.	5/24/2018
11	DY7-8 Performance Measures & Reporting	Are there any measures in DY7 and DY8 that were not previously reported?	Yes, the Stage 1 System Transformation Measures are completely new to the DSRIP program starting in DY7 & DY8.	5/24/2018
12	DY7-8 Stage 1 Measures	Are the System Transformation Measures (Stage 1) P4P or P4R?	The DY7-DY8 Stage 1 System Transformation Measures are all P4R.	5/24/2018
13	DY7-8 Stage 1 Measures	How are hospitals to report provider data and NCOA verification for the new Stage 1 measure (Percent of PCP meeting PCMH (NCOA)/ Advanced Primary Care)? Should it be included in the NJ DSRIP Standard Reporting Workbook?	Yes, hospitals should report this data in the SRW. Hospitals should report all primary care physicians that are employed and/or contracted by the hospital as well as the hospital reporting partner(s) that serve the hospital's attributed New Jersey Low Income population in their denominator. The hospital should then verify how many of those PCPs practice at sites that are PCMH certified using the NCOA website and report it in the numerator. Additional details will be included in the forthcoming databook.	5/24/2018
14	DY7-8 Stage 2 Measures	In DY7-DY8 Stage 2 Quality Improvement, are there any changes to specific P4R or P4P status of measures?	No, there are no changes to specific P4R or P4P from DY6 to DY7-DY8 Stage 2 Quality Improvement reporting.	5/24/2018
15	DY7-8 Stage 2 Measures	Can you please clarify the DY7 Stage 2 (Quality Improvement) measures? Are these the project related Stage 3 measures from previous demonstration years, i.e. DY6?	Yes, The DY7-DY8 Stage 2 measures are the previously DY6 Stage 3 project related measures. These measures are not new to the program.	5/24/2018
16	DY7-8 Stage 2 Measures	What is the minimum number of pay-for-performance measures for DY7 Stage 2?	Starting in DY7, all hospitals are required to have at least three P4P Quality Improvement (Stage 2) measures. We are working with the Department on a timeline for notifying affected hospitals of the additional measures. We will also be issuing an update to the Funding and Mechanics Protocol (FMP) to account for this requirement.	5/24/2018
17	DY7-8 Stage 3 Measures	If one of our partners does not report one of the P4R measures in Stage 3, will we be penalized the entire Stage 3 P4R funding?	All seven P4R Stage 3 measures must be reported by the hospital to earn the P4R funding. If one measure is not reported, the hospital forfeits all P4R Stage 3 funding.	5/24/2018
18	DY7-8 Stage 3 Measures	What is the process for DOH selecting an alternate measure for Stage 3 P4P?	CMS has rejected the DOH proposal to include a menu of alternate Stage 3 P4P measures for hospitals that are considered high performers on any given Stage 3 P4P measure. While there is no longer a process for DOH selecting an alternate measure for Stage 3 P4P, DOH is working on a solution with CMS to reward hospitals for high performance.	5/24/2018
19	DY7-8 UPP Measures	How does a hospital earn UPP and forfeiture payments?	The UPP payments consisting of the DSRIP Target funds from hospitals that elected to not participate and the UPP carve out allocation will be distributed to hospitals based on maintaining or improving on a specific set of twelve Population Focused Improvement metrics identified as a UPP metric. There will also be a forfeiture portion of the UPP funds consisting of target funds from hospitals that do not achieve project metrics and forfeited amounts from hospitals electing to discontinue in the DSRIP program. Hospitals eligible to participate in the forfeiture portion of the UPP must achieve a met status of not less than 8 of 12 UPP measures.	5/24/2018
20	DY7-8 UPP Measures	What is the baseline for the UPP measures? Is it the previous year or the original baseline (2014)?	Guidance on the baselines of the UPP measures for DY7 and DY8 will be issued at a later date.	5/24/2018
21	DY7-8 UPP Measures	Why would substitutions be applied to UPP measures? Is that something requested by the hospital?	There are two reasons stated in the FMP for why a hospital may require a substitution on a UPP measure: Page 28: "...some hospitals may not have service areas required to calculate one or more of the twelve UPP metrics, these hospitals must substitute those metrics for one or more of the four replacement UPP metrics, not to exceed twelve total metrics." AND Page 28: "All hospitals must have a total of twelve UPP measures and only those hospitals that lack obstetrical (OB) or pediatric departments must choose substitute measures from the substitution list. These (non-OB/non-pediatric) hospitals will have selected their substitution choice in their submitted Hospital DSRIP Data Reporting Plan." This is not something that is requested by the hospital; the Department will reach out to individual hospitals if a UPP substitution measure is needed.	5/24/2018
22	DY7-8 UPP Measures	When will a hospital be advised they need to participate in the UPP substitution process?	The timeline for the substitution process has not yet been determined. The Department will be reaching out to individual hospitals once this process begins.	5/24/2018
23	DY7-8 UPP Measures	If we have two hospitals participating in the program and they each have a different set of UPP measures, will both hospitals change to the one set of measures?	The UPP measures have not changed for DY7 and DY8. Participating hospitals will continue to report on these measures as they have in past demonstration years. If a hospital is required to utilize one of the UPP substitution measures, the Department will reach out to the individual hospital at a future date.	5/24/2018
24	Attribution	How often will the Attribution list be updated?	The Attribution list will be updated annually in February.	5/24/2018
25	Attribution	If we bill Medicaid participants, can we use their data in our outcomes?	There is no DSRIP restriction on billing for services provided as long as it complies with all other applicable regulations. Please speak with your Medicaid Provider Representative regarding questions about appropriate Medicaid services being billed.	5/24/2018
26	Other	Will there be a dashboard showing performance for the previous demonstration years?	We are working on ways to share performance data with hospitals. We would like to better understand what information hospitals would want in such dashboards and how they would want the information displayed. If you have suggestions, please email them to NJDSRIP@pcgus.com .	5/24/2018