NJ DSRIP
Website Updates

New Jersey Department of Health (NJDOH)

March 12, 2015
Delivery System Reform Incentive Payment (DSRIP) Program

The Delivery System Reform Incentive Payment (DSRIP) Program is one component of the New Jersey’s Comprehensive Medicaid Waiver as approved by the Centers for Medicare & Medicaid Services (CMS). DSRIP is a demonstration program designed to result in better care for individuals (including access to care, quality of care, health outcomes), better health for the population, and lower costs by transitioning hospital funding to a model where payment is contingent on achieving health improvement goals.

Hospitals may qualify to receive incentive payments for implementing quality initiatives within their community and achieving measurable, incremental clinical outcome results demonstrating the initiatives’ impact on improving the New Jersey health care system.

The DSRIP program supports the Healthy New 2020 vision: “For New Jersey to be a state in which all people live long, health lives.”

Prepared by Myers and Stauffer LC
Secure login users will be determined at a later date and detailed instructions will be provided at that time. Keep in mind the login will be treated similar to the FTP site, there will be a limit of two users per hospital.
The email address is the system identifier.

Step One: Log in with email address and password and fill in CAPTCHA box.

Step Two: If the user forgot their password, enter users email address in box (slide 6), fill in CAPTCHA and click on “Send Forgot Password”. The user will receive an email from MSLC IT system with a live link.

Once the user receives this notification, they will have three Business days to reset the password. If the user fails to do so in the allowed time frame, the user will be required to start the process from the beginning.
Send Forgot Password

Email

Enter your email address

Select the 'Send Forgot Password Email' below.

IHBYL

Try another
Enter the text you see above.

Send Forgot Password Email

An email containing a 'reset link' will be sent to the requester.
Forgot Password

This email was sent automatically by Myers and Stauffer LC web portal in response to your request to reset your password. For your protection, only you, the recipient of this email can proceed to the next step in the password reset process.

To reset your password and access your account, either click on the link below or you may copy and paste the link into the address bar of your browser.

http://mslc-nightly-01:8091/ForgotPassword/ChangePassword?id=7d4f4bcb-c6b0-4520-a6aa-55d60778a84f&userId=M2lyTVNMQ1NhHR8zymRZgZwZg=

If you did not send this request, please contact the help desk at (844) 325-7811.

Please note: You have until xx/xx/2015 to change your password. If you do not change your password before the expiration date, you will need to begin the "Forgot Password" process from the beginning.

Thank you,

Myers and Stauffer LC

Email with reset link will be sent.

Once the user receives this notification, they will have three business days to reset the password. If the user fails to do so in the allowed time frame, the user will be required to start the process from the beginning.
Leave current password blank
Login

Email

Password

[Image of code: IHBYL]

Try another
Enter the text you see above

Login

Password Successfully Changed. Please use new password to login.

Forgot Password?
If you do not have an approved account to this website, please contact the NJ DSRIP Support Team at:
(844) 325-7811

Login

Email

Password

If you receive this message, please check the following areas:
1) Ensure the username has been entered correctly.
2) Ensure that the user has a login account.

Forgot Password?
The above tabs provide the ability to:

- **Performance Measurement**
  - MMIS Measure Acknowledgement

- **Project Management**
  - Reapplication Process
  - Reapplication Upload

- **Login/Logout** – Login or Logout button will be available depending on user’s login state

**Performance Measure:**

The purpose of this tab is to present calculated results from their data, to give them an opportunity to acknowledge the data and lastly to give the Industry an opportunity to download a table of the results.

**Project Management:**

The purpose of this tab is to give the user an opportunity to indicate whether they will re-apply to the NJ DSRIP program.
1. Is it the intent of your hospital organization to continue in the DSRIP program?

- Yes
- No

Submit
Re-Application Process

Step 1:

User clicks the “Yes” radio button and then clicks submit button. The system expands the current screen to add Items 2 – 6 for the user to respond to.

The user will respond to each question either by entering comments or by selecting a file to upload.

Step 2:

Each question must be answered and or a file uploaded. If user does not answer each of the five questions, And “submit” is clicked, the user will get an error message that states:

“User must add comments or upload attachment”

Note: There are only 300 characters allowed to type the response. If more space is need, a separate document can be uploaded.

If system is prompted to present the above message, the system will place the message under the item text for the appropriate missing information.
By submitting “Yes,” you are indicating that your hospital plans to reapply for the New Jersey DSRIP program. Once you have selected “Yes” and the “Submit” button, additional reapplication questions will appear below (see next slide).

After response to all questions, you may select, “Print Screen” to obtain a copy of the questions.

You must select “Submit Reapplication” to complete reapplication process.
Your DY4 DSRIP reapplication has been submitted.

If you have any comments or questions, please click the link below to send a message to the NJDSRIP Support Team:

njdsrip@mslc.com

Done
1. Is it the intent of your hospital organization to continue in the DSRIP program?

- [ ] Yes
- [x] No

Submit

By submitting "No," you are indicating that your hospital will no longer be participating in the NJ DSRIP program.

If this is your intent, a formal Letter of Withdrawal on institutional letterhead is required. The letter should include the reason for withdrawal and an understanding that the hospital will no longer be eligible to participate in the remaining years of the DSRIP program. The letter will need to be submitted to the New Jersey Department of Health Executive Director Healthcare Financing.

This is a live link, click on this link and an email box will appear.

njdsrip@mslc.com

If you need further assistance, please contact the NJ DSRIP Support Team at (844) 325-7811 or send an email to: