NYC HEALTH+ HOSPITALS

STRATEGIC PLANNING COMMITTEE

OF THE BOARD OF DIRECTORS

April 12, 2018 – 1:00pm
Boardroom
125 Worth Street, Room 532

AGENDA

I.   Call to Order   Gordon J. Campbell

II.   Adoption of October 11, 2017
Strategic Planning Committee Meeting Minutes   Gordon J. Campbell

III. Information Items
     a. Revised system scorecard   Matthew Siegler
                                          Senior Vice President
                     Managed Care & Patient Growth

Dr. Eric Wei
Vice President Chief Quality Officer

IV. Old Business

V.   New Business

VI. Adjournment   Gordon J. Campbell

MINUTES

STRATEGIC PLANNING COMMITTEE MEETING
OF THE BOARD OF DIRECTORS

OCTOBER 11, 2017 – 12:30 PM

The meeting of the Strategic Planning Committee of the Board of Directors was held on October 11, 2017 in NYC Health + Hospitals' Boardroom, which is located at 125 Worth Street with Mr. Gordon Campbell, presiding as Chairperson.

ATTENDEES

COMMITTEE MEMBERS

Gordon Campbell, Chairperson of the Strategic Planning Committee
Stanley Brezenoff, CEO/President
Josephine Bolus, RN
Barbara Lowe
Robert F. Nolan
Mark Page

OTHER ATTENDEES

J. DeGeorge, Analyst, Office of the State Comptroller
M. Dolan, Sr. Assistant Director, DC 37
K. Krutz, CAM, PAGNY
O. DeEuya, Account Manager, Juniper Networks

NYC HEALTH + HOSPITALS' STAFF

M. Allen, Interim Chief Medical Officer
P. V. Anantharam, Senior Vice President, Finance
M. Chidester, Chief of Staff, Office of Transformation
A. Cohen, Vice President, Office of Transformation
R. Colon-Kolacko, Senior Vice President, Chief People Officer
S. Fass, Assistant Vice President, Planning
C. Hercules, Chief of Staff, Office of the Chairman of the Board of Directors
S. Guido, Senior Vice President, CIO
P. Lockhart, Secretary to the Corporation, Office of the Chairman of the Board of Directors
S. Loville, Sr. Management Consultant, Central Office Finance

A. Marengo, Senior Vice President, Communications
M. McClusky, Senior Vice President, Post Acute Care
K. Mendez, Senior Vice President, Chief Nurse Executive
S. Ritzel, Associate Director, NYC Health + Hospitals/Kings County
S. Russo, Senior Vice President, Office of Legal Affairs
A. Shkolnik, Assistant Director, Medical & Professional Affairs
D. Thompson, Associate Executive Director, NYC Health + Hospitals/Kings County
S. Walsh, Assistant Vice President, Office of Transformation
R. Wilson M.D., Senior Vice President, Chief Transformation Officer
V. Yogeshwar, Senior Director, Office of Transformation

CALL TO ORDER

Mr. Gordon Campbell, Chair of the Strategic Planning Committee, called the meeting of the October 11, 2017 Strategic Planning Committee to order. The minutes of the May 9, 2017 meeting were adopted.

ACTION ITEM

NYC Health + Hospitals is required to adopt and to report to the New York State Office of the State Comptroller's Authority Budget Office ("ABO") each year a mission statement and performance measures to assist the system in determining how well it is carrying out its mission.

The following resolution was moved and adopted by unanimous vote:

> "Adopting NYC Health + Hospitals' Mission Statement and Performance Measures for fiscal year 2017 as required by the Public Authorities Reform Act of 2009 which require a local public authority such as NYC Health +Hospitals to adopt each year a mission statement and performance measures to assist in determining how well it is carrying out its mission."

The list of performance measures use the same indicators in the Mayor's Management Report and will be revisited for the next yearly submission. The performance measures should reflect the definitions in the revised System Scorecard.

INFORMATIONAL ITEMS

Revised System Scorecard
Dr. Ross Wilson, Senior Vice President
Office of Transformation

The revised System Scorecard, reflecting the Strategic Plan for NYC Health + Hospitals, was received with minor revisions. There was agreement to close out the current System Scorecard. It should be noted that the previous scorecard is off-target for "unique patients being treated." All other items are on target or trending toward target.

The development of the new System Scorecard was led by NYC Health + Hospitals Executive Sponsors. Each Executive Sponsor identified key metrics that reflect performance on their respective strategies. Metrics were discussed and agreed upon with the Chair of the Board. Further, the operational scorecards will reflect the Strategic Plan and cascade from the System Scorecard.

Intergovernmental Affairs Update
John Jurenko, Vice President
Government, Community Relations, and Planning

NYC Health + Hospitals is actively trying to delay DSH cuts. An amendment was included in the Child Health Insurance Program (CHIP) reauthorization bill to delay DSH cuts. The DSH cuts State timeline was shared with the Board. The NYS Medicaid Redesign Team (MRT) indigent care technical work group was assembled; P.V. Anantharam will represent the NYC Health + Hospitals. The MRT workgroup will meet in October, November, and December and recommendations would be released in mid-January with final adoption by April 1, 2018 with changes to how DSH funds are disbursed in State if Congress does not act.

There was no old or new business to discuss.

The meeting was adjourned by Chair Gordon Campbell.

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Strategic Planning Committee Update and System Scorecard

Matt Siegler
SVP Managed Care and Patient Growth

Dr. Eric Wei
Chief Quality Officer

Strategic Planning Committee
April 12, 2018

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Recent City Council Testimony and Key Priorities

Top Three Priorities

- invigorate and expand primary care,
- improve access to needed specialty care
- bring fiscal solvency to Health + Hospitals

Results

- better address community health needs
- improve the patient experience
- maximize opportunities for new revenue

NYC HEALTH+ HOSPITALS

Seven Point Financial Plan

For Health + Hospitals to be viable and to provide the services our community needs, we must take the following seven actions:

- **Reduce administrative expenses**

- **Bill insurance for insured patients and contract effectively with managed care plans**

- **Code and document effectively so that we can receive the payment we deserve**

- **Stop sending away paying patients**

- **Invest resources into hiring positions that are revenue generating**

- **Start providing those specialized services that are well reimbursed**

- **Convert uninsured people who qualify for insurance to be insured**

Strategic Plan and System Scorecard

- Currently developing executive budget submission and updated strategic plan

- Aim is to build on the core vision and mission of Health + Hospitals, while empowering teams across the organization to execute on key goals

- Updated system scorecard reflects key goals and initiatives

- Currently aligning dashboards and metrics across the organization

NYC HEALTH + HOSPITALS — Updated System Scorecard – FY 2018, April

	#	Measure	EXECUTIVE SPONSOR	REPORTING FREQUENCY	TARGET	ACTUAL FOR PERIOD	VARIANCE TO TARGET	PRIOR PERIOD	PRIOR YEAR SAME PERIOD
Increase Primary Care									
**	1	Unique primary care patients seen in last 12 months	VP PC	Annually	430,000	N/A	N/A	432,000	447,000
Improve Access to Specialty Care					Q4 2018				
	2	Number of e-consults completed/quarter	CPHO	Quarterly	11,000	6107	4893	3908	3049
Stabilize Budget					FY 2018				
	3	Patient Care Revenue/Expenses	CFO + SVP MC	Quarterly	↗	55%	N/A	60%	52%
	4	# insurance applications submitted/month	CFO + SVP MC	Quarterly	20,100	17,473	-13%	N/A	14,935
	5	% of M+ medical spend at H+H (CY 18)	SVP MC	Quarterly	42%	39%	-3%	37%	36%
*	6	Total AR days per month (excluding in-house)	CFO	Monthly	45	45.5	-1.9	46.9	51.9
Information Technology									
**	7	Epic implementation milestones	CIO	Quarterly	100%	N/A	N/A	N/A	N/A
	8	ERP milestones	CIO	Quarterly	100%	100%	0	N/A	N/A
Quality and Outcomes					CY 2018				
*	9	Sepsis 3-hour bundle	CMO + CQO	Quarterly	63.5%	61.88%	-3%	-	-
*	10	Follow-up appointment kept within 30 days after behavioral health discharge	CMO + CQO	Quarterly	66%	-	-	-	62%
	11	HgbA1c control < 8	CPHO + VP PC	Quarterly	66.6%	64.4%	-2.2%	63.9%	64.4%
	12	% Left Without Being Seen in EDs	CMO + CQO	Monthly	4%	7%	-3%	5%	6%
Patient Satisfaction					CY 2018				
*	13	Inpatient care - overall rating (Top Box)	CNO + SVP AC	Quarterly	65.4	60.8	-7%	60.4	60.2
*	14	Ambulatory care (medical practice) – Recommend Provider Office (Top Box)	CNO + SVP AC + VP PC	Quarterly	83.6	82.1	-2%	81.5	80.4
*	15	Post-acute care - likelihood to recommend (mean)	CNO + SVP PAC	Semi-Annually	84.3	-	-	82.3	82.3
Culture of Safety					CY 2018				
	16	Acute Care – Overall Safety Grade	CNO + CQO + SVP AC	Annually	76%	62%	-14%	59%	NA
	17	Post-Acute Care – Overall Safety Grade	CNO + CQO + SVP PAC	Annually	74%	72%	-2%	62%	NA
	18	Ambulatory (D & TC) – Overall Safety Grade	CNO + CQO + VP PC	Annually	50%	39%	-11%	41%	NA

* = retained from prior scorecard
** = retained with updated benchmarks

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Updated System Scorecard Glossary

Increase Primary Care

#	Metric		Description
1	Unique primary care patients seen in last 12 months	New metric	Measure of primary care growth and access; measures active patients only, period = FY 17

Improve Access to Specialty Care

| 2 | Number of e-consults completed/quarter | New metric | Top priority initiative and measure of specialty access |

Stabilize Budget

3	Patient Care Revenue/Expenses	New metric	Measures patient care revenue growth and expense reduction adjusting for changes in city/state/federal policy or other issues outside H+H management's control
4	# insurance applications submitted/month	New metric	Top priority initiative and measure of efforts to convert self-pay to insured
5	% of M+ medical spend at H+H	New metric	Global measure of M+ efforts to steer patient volume to H+H, removes pharmacy and non medical spend
6	Total AR days/month (excluding in-house)	Retained metric	Unity/Soarian. Total AR days, excluding in-house

Information Technology

| 7 | Epic implementation milestones | Updated metric | Reflects updated deployment schedule: Enterprise validation and build + four acute care + one ambulatory facility live; testing and training at two other acute care and two ambulatory facilities on track. |
| 8 | ERP on track | New metric | Reflects key milestones in finance/supply chain go live, human capital management upgrade, and payroll project design |

Quality and Outcomes

9	Sepsis 3-hour bundle	Retained metric	NYSDOH Quarterly Facility Sepsis Report-aggregated to reflect a system score
10	Follow-up appointment kept within 30 days after behavioral health discharge	Retained metric	Follow-up appointment kept with-in 30 days after behavioral health discharge as reported by the MCO (Emblem & MetroPlus) data for VBP QIP submission
11	HgbA1c control < 8	New metric	Population health measure for diabetes control
12	% Left Without Being Seen in EDs	New metric	Measure of ED efficiency and safety

Patient Satisfaction

13	Inpatient care - overall rating (Top Box)	Retained metric	Aggregate system-wide Acute Care/Hospital score HCAHPS Rate the Hospital 0-10 (Top Box)
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15	Post-acute care - likelihood to recommend (mean)	Retained metric	Press Ganey Survey. Likelihood to recommend (mean)

Culture of Safety

16	Acute Care – Overall Safety Grade	New metric	Measure of patient safety, quality of care, and staff psychological safety
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