



**Behavioral Health Value Based Payment Behavioral Health
Care Collaborative (BH VBP BHCC) Readiness Program**

**Template for
Year 1 – Preliminary Workplan**

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1. Introduction

A. Overview / Purpose

This document serves as a guideline/ template for creation and submission of the required Year One BHCC preliminary workplan to the BHCC MCO Partner.

The submitted BHCC preliminary workplan will represent the collective work of the BHCC network entities and outlines the initial direction for the administration of the BHCC program and achievement of the BHCC programmatic goals.

The BHCC preliminary workplan is a substantive requirement that is meant to provide a current assessment of anticipated activities of the BHCC in the Four BHCC Readiness Areas.

This submitted preliminary workplan will provide focus for the BHCC activities during the anticipated three BHCC program years.

B. Primary & Secondary Contact Information

Please provide the following information:

BHCC Name	
Name of Primary Contact	
Primary Contact E-mail Address	
Primary Contract Phone Number	
Name of Secondary Contact	
Secondary Contact E-mail Address	
Secondary Contract Phone Number	

C. Instructions

The preliminary workplan is due to the BHCC partner MCO no later than March 22, 2018.

Release of BHCC Year One funding amount two and any subsequent funding in following BHCC program years is contingent upon submission and approval of the preliminary workplan. Failure to submit the required workplan will render the BHCC ineligible for continued participation in the BHCC program.

Please use this form as a template for the development of the Year One BHCC preliminary workplan.

The BHCC Year One preliminary workplan has four major workplan areas: Organization; Data Analytics; Quality Oversight; and, Clinical Oversight.

Submitted preliminary workplan must include an Activities / Timeline Project Outline for each workplan area.

Please limit submission to no more than four pages per workplan area for a total of no more than 16 pages for this deliverable. Please use Arial font, no smaller than 10 pt.; 12 pt. preferred.

The 16 pages does not include any supporting documentation needed as part of your response. **Page total does not include Member Submission Template, Organizational Chart, and Budget.**

Be sure to include all of the information requested in this document. Please place any addition information within an appendix where applicable.

Release of BHCC Year One funding amount two is contingent upon submission of the preliminary workplan.

BHCC YEAR 1 PRELIMINARY WORK PLAN

A. Workplan Area One: Organization

Maximum Narrative Four Pages Total for Area One

Organizational Structure and Rules: Outline of Activities / Timeline for each item below.
1. Describe in detail BHCC Entity Type, i.e. IPA, independent network of providers, etc. (current or projected); and directional purpose of the BHCC
2. Describe and detail a plan, including a schedule and activities for Communication and Engagement activities within the BHCC
3. Describe and detail a plan including a schedule and activities for Communication and Engagement activities with the BHCC MCO partner. This must include a discussion about submission of: Quarterly summary status report and other means of engagement (e.g. phone call(s) if needed) Year One: Workplan due March 22, 2018 Year Two: 4-1-18 thru 3-31-19: Workplan updates due to MCO in first week of August 2018; and first week of January, 2019. Year Three: 4-1-19 thru 3-31-20: Workplan updates due to MCO in first week of August 2019; and first week of January, 2020.
BHCC Network and Affiliate Providers: Outline of Activities / Timeline for each item below.
4. Update and submit the Excel overview of provider types included in BHCC – Excel member submission template
5. Describe a plan to address BHCC gaps, if any, in care continuum
6. Describe a plan to create BHCC Membership Standards
7. Describe a plan to create a BHCC process for Joining/Leaving/Grievance
8. Submit initial organizational chart
Finance Structure: Outline of Activities / Timeline for each item below.
9. Describe a plan for bringing in the input of BHCC: OMH Art 31, OASAS Art 32, and designated HCBS BHCC provider partners in decisions regarding funds allocation and for funds distribution to support BHCC activities in the four readiness areas.
10. Describe a plan for dues (if any)
11. Discuss an approach to identifying funding sources beyond the BH VBP Readiness Program
12. Discuss an approach to developing a Sustainability Plan
13. Submit proposed State-provided budget. Budget should include summary of items and activities for each readiness area as described, but not limited to those, in the budget template provided by the State.

B. Workplan Area Two: Data Analytics

Maximum Four Pages Total for Area Two

All data activity must be HIPAA and 42 CFR Part 2 Compliant

Data Management and Reporting: Outline of Activities / Timeline for each item below.

14. A plan to identify, by MCOs, total MMC enrollees served by the BHCC
15. A plan to identify ongoing service utilization trends in Physical Health, Behavioral Health, Medication Assisted Treatment for substance use disorders, Social Determinants of Health, and BH Home and Community Based Services
Data Analysis and Sharing: Outline of Activities / Timeline for each item below.
16. A plan to assess IT capability, including: applications/software used (e.g. EMRs), data used, including plan for sharing IT infrastructure, plan for addressing confidentiality and consent issues. Data may inform dashboard development, clinical data sharing, cost and quality reports for relevant stakeholders
17. A plan to select or build a shared IT platform; analysis should consider relationship to potential VBP contract requirements
18. Descriptions of barriers to the above IT goals
Utilizing data: Outline of Activities / Timeline for each item below.
19. A plan for utilizing data to develop a BH and support services gap analysis for BHCC services areas
20. A plan for implementing performance dashboards
21. A plan to ensure ongoing monitoring and implementation of care planning
22. A plan to evaluate improvement opportunities and collaborate with MCOs

C. Workplan Area Three: Quality Oversight

Maximum Four Pages Total for Area Three

Quality Measurement and Reporting: Outline of Activities / Timeline for each item below.
23. A plan to determine which measures to use to monitor internal performance for continuous quality improvement
24. A plan to report collected metrics and outcomes to BHCC partners
25. Description of current VBP outcome/performance arrangements in the BHCC Member Submission Template

D. Workplan Area Four: Clinical Integration

Maximum Four Pages Total for Area Four

Clinical Integration Protocol and Standards: Outline of Activities / Timeline for each item below.
26. A plan for development of clinical practices, protocols and service coordination activities that support care coordination and clinical activity integration across the BHCC
27. A plan to respond when access issues or quality indicators are not being met among the BHCC providers

28. A plan for monitoring individual programs for compliance with BHCC quality expectations and for corrective action when problems are identified among the BHCC providers

AUTHORIZATION FOR SUBMISSION

**Authorization for Submission of the
Behavioral Health Value Based Payment Behavioral Health
Care Collaborative (BH VBP BHCC) Readiness Program**

BHCC Name _____

CERTIFICATION STATEMENT

This certifies that the submitted Year 1 BHCC Preliminary Workplan represents the collective work of the BHCC network entities and that to the best of my knowledge and belief, the information fairly and accurately represents an appropriate initial direction for the administration of the BHCC program and aligns with the BHCC programmatic goals.

BHCC Lead Agency Attestation
(signed by same authority who signed the Lead Agency BHCC application attestation)

Sign Date:

Authorized Signature:

Print Signatory Name:

Print Signatory Title:

(notary)