Gainsharing Plan: Healthy Greater Newark Medicaid ACO
Section 1: Organization Information

Organization Name: Healthy Greater Newark
Address: 211 Warren St Newark, NJ 07103
Contact Name: Denise Rodgers, MD, Chair Healthy Greater Newark Board of Trustees
Contact Telephone Number: (862)236-1025
Contact email: denise.rodgers@rutgers.edu

Section 2: Basic Requirements

A. Organizational goals and objectives:

The Healthy Greater Newark Accountable Care Organization (ACO) is a group of Newark-area hospitals, primary care, specialty care, behavioral health care providers, and community organizations committed to improving the quality of care and health outcomes for Newark residents from three zip codes (07103, 07108, and 07112) who are enrolled in Medicaid. Another goal of the ACO is to control the overall cost of care by reducing unnecessary emergency department visits and inappropriate hospital admissions.

The goals of the Healthy Greater Newark ACO (HGN ACO) are in keeping with the Triple Aim of Healthcare: to improve the overall experience of healthcare, to improve the health of the population and to reduce per capita costs of care for Medicaid enrollees living in the three designated zip codes. Healthy Greater Newark’s first year objectives are:

- Improving the coordination of care of our patients through the use of interprofessional teams augmented by appropriate technologies.
- Expanding and integrating behavioral health and substance abuse treatment into primary care
- Placing appropriate staff to work in an enhanced care coordination model
- Implementing care coordination for high utilizing patient populations
- Developing a quality improvement and evaluation program
- Contracting with Managed Care Organizations to help coordinate care as part of the HGN ACO care team.
- Reducing unnecessary ED utilization and preventing unnecessary hospital admissions
- Improving patient satisfaction
- Developing a health education program that will improve health literacy in the population served

The HGN ACO intends to manage a population of “high utilizing patients” as the initial phase of effecting health care outcomes in Newark. The regional collaboration is focused on three Newark based zip codes (07103, 07112, and 07108). This geographic area has been identified, through data analysis, as having one of the highest concentrations of unmet healthcare needs in the city. These three zip codes also have a significant proportion of residents who have Medicaid or are Medicaid eligible.
The HGN ACO Care Coordination Team, is intended to be the “hub” for managing high utilizing patients in the three zip code area in Newark. They will work in collaboration with the care coordination teams already in place at University Hospital, Newark Beth Israel Medical Center and St Michaels Medical Center. The team will refer, coordinate and track patients to ensure they receive appropriate services after visiting the Emergency Department or after being discharged from the hospital. Patient follow up might involve referral to the Newark’s Federally Qualified Health Centers, community based primary care providers, other specialists, University Behavioral Health Care, Integrity House, the Visiting Nurses Association and other providers of medical, behavioral and homecare services. It is our intent to coordinate an individual patient’s care with their Managed Care Organization with whom we plan to contract.

The New Jersey Innovation Institute (NJII), a New Jersey Institute of Technology (NJIT) company supports the technology infrastructure for Healthy Greater Newark through a Cooperative Services Agreement. NJII received a $49.1 Million Practice Transformation Network (PTN) grant from the Centers for Medicare and Medicaid to provide technical assistance support to help equip clinicians in New Jersey with tools, information, and network support needed to improve quality of care, manage costs and increase patients’ access to information. Throughout New Jersey they currently support Delivery System Reform Payment (DSRIP) programs, Physician Quality Reporting System (PQRS) programs and other Accountable Care Organizations (ACO’s).

B. Quality measures:

HGN ACO will implement a quality measurement program including the mandatory measures outlined in the NJ Medicaid ACO Demonstration Project Quality Metrics document as approved and posted on the Division of Medical Assistance and Health Services website at: http://www.nj.gov/humanservices/dmahs/info/NJ_Medicaid_ACO_Demonstration_Project_Quality_Metrics_4-18-16.pdf

In addition, the Healthy Greater Newark ACO has preliminarily decided to monitor the following voluntary measures: Tobacco Screening and Cessation, Weight Assessment and Counseling (children and adults), Controlling High Blood Pressure, Cholesterol Management for Patients with Cardiovascular Conditions, 30 Day Readmissions Following Heart Failure, HbA1c Testing and HbA1c Control <8.

The HGN ACO Executive Director and Clinical Director will work with the Rutgers Center for State Health Policy on the evaluation of these measurements including the benchmarks and reporting methodology.

C. Collaboration:

The HGN ACO Board has reviewed and approved an initial conceptual model for a collaborative care coordination program. The model incorporates elements of the Delivery System Reform Incentive Payment (DSRIP) program operational in two of our Newark based hospitals and the Camden Coalition care model for managing high utilizing patients. It is also supportive of requirements under the Transitional Care Management (TCM) reimbursement option that
primary care providers in Newark intend to implement. The Healthy Greater Newark ACO Collaborative Care Coordination Program will be supported by the ACO provider partners including Newark Beth Israel Medical Center, University Hospital, St Michael's Medical Center, Newark Community Health Centers, Inc., Rutgers University Behavioral Health Care, Visiting Nurses Association Health Group, and Integrity House.

See Letters of Support – Attachment 1

D. Care Coordination:

The HGN ACO Care Coordinator will operate as a facilitator of the interprofessional teams that are delivering care. Patients who fall under the direct care of HGN ACO, will be monitored and their care coordinated for an estimated 90 day period, or however long is required to assist in the effort to improve access to ongoing outpatient care and to improve health outcomes. The care coordinator will follow up on all services identified to improve the patient’s clinical health conditions. The care coordinator may attend the PCP and other provider appointments with the patient. The care navigator may attend the PCP and other provider appointments with the patient. The care navigator will follow up on all social determinant related services identified to improve the patient’s daily living conditions. In some instances the navigator may accompany patients to their visits if the care coordinator is unavailable. ED and Hospital admissions and discharges will continue to be tracked daily by the New Jersey Innovation Center (NJII – HGN ACO’s Technology Partner) and the care coordination team.

The full care team, which will include a care coordinator from each ACO partner organization and institution involved in the day to day delivery of care, will meet virtually once a week for a case conference to discuss particularly difficult to manage patients. These sessions will be led by the HGN ACO Clinical Director. The team will use this time to review critical patient needs and make necessary connections to effect the care plan. Any patient who requires more than 90 days of case management will be discussed at this conference as well.

Monthly tracking reports will be reviewed by the Clinical Director to monitor the overall effectiveness of the cooperative care model’s interventions. The Clinical Director will lead a monthly “Continuous Quality Improvement” meeting of all stakeholders to review the program outcomes, perform data analysis and provide an educational forum to educate the care team about available resources or about current standards of care.

E. Medication Utilization:

HGN ACO will implement medication management services that have been shown to be effective by the Patient Centered Primary Care Collaborative. The intervention includes the following steps: 1) Identify patients that have not achieved clinical goals of therapy 2) Understand the patient’s personal medication experience/history and preferences/beliefs 3) Identify actual use patterns of all medications including OTCs, bioactive supplements, and prescribed medications 4) Assess each medication for appropriateness, effectiveness, safety (including drug interactions) and adherence (in that order) focused on achievement of the clinical goals for each therapy. Identify all drug therapy problems (the gap between current therapy and that needed to achieve
optimal clinical outcomes) 6) Develop a care plan addressing recommended steps including therapeutic changes needed to achieve optimal outcomes 7) Patient agrees with and understands care plan which is developed in consultation with the patient’s provider 8) Document all steps and current clinical status vs. goals of therapy 9) Follow-up evaluations with the patient are critical to determine the effects of changes, reassess actual outcomes, and recommend further therapeutic changes to achieve the desired clinical goals/outcomes 10) A reiterative process - care is coordinated with other team members and personalized goals and therapy are understood.

F. Risk:

HGN ACO will follow the risk model described in the “Recommended Approach for Calculating Savings in the NJ Medicaid ACO Demonstration Project” as published by Derek DeLia, Ph.D. and Joel C. Cantor, Sc.D. from the Center for State Health Policy and based on the Chronic Disability and Illness Payment System (CDPS) economic risk framework from the Agency of Healthcare Research and Quality.

G. Public Comment:

HGN ACO shall open a portion of its Board Meeting to receive public comment and will hold a series of meetings with community advocates and leaders to obtain community feedback, the first of which will be held in June 2016. The HGN ACO Gainsharing Plan was posted on the Greater Newark Healthcare Coalition website located at: http://greaternewarkhcc.org/healthy-greater-newark-aco/ where the public is invited to send comments to the Board via email.

In addition, Greater Newark Healthcare Coalition holds an annual Public Health Symposium, this year scheduled for the Fall of 2016, where the HGN ACO will be featured. This will provide another opportunity for stakeholders and members of the public to comment on the gainsharing plan.

Section 3: Quality

A. Quality assessment:

HGN ACO has a cooperative services agreement with the New Jersey Innovation Institute (NJII). They run and operate the Highlander Health Data Network the regional Health Information Exchange for Newark based providers. It is anticipated that this platform will be used as the technical foundation for the ACO, including the initial importing and analyzing of Medicaid data for care coordination risk stratification, case management and quality reporting. NJII is a certified vendor for PQRS and CMS GPRO reporting for several hundred healthcare providers in NJ and therefore, adept at quality assessment and reporting. A plan that details the process of developing a detailed Quality Plan can be found in Attachment 2.
The source of data, the interface structure, the data evaluation methodology and the reporting structure for health outcome measurements will be also developed. This effort will require research into the existing IT environment for each provider and then working with NJII and the provider organizations or offices to develop a technical architecture model and a logical data flow model that shows how patient information will flow securely to the providers in the HGN ACO and how the health outcomes will be captured and tracked. Data will flow either directly from the provider’s EMR where there is an existing interface in place, or the NJII team will deploy staff to perform chart reviews.

See Quality Plan – Attachment 2

Click here to specify quality measures to be used

Section 4: Patient Experience

A. Patient Experience:

HGN ACO intends to utilize a system based on the Patient Experience Assessment designed by the Camden Coalition. The Camden ACO has developed three mechanisms to capture information about the patient experience, and to act upon findings to improve quality of care. 1) An annual patient satisfaction survey 2) An online citywide feedback system (English: http://www.camdenhealth.org/feedback/; Spanish: http://www.camdenhealth.org/reaccion/) 3) A citywide phone line that feeds to a voicemail box checked daily.

As this is a Year 2 reporting requirement, HGN ACO will work with Camden and the Trenton Health Team to create a system to track patient experience during the second year of the demonstration project.

Section 5: Savings

A. Benchmark Period:

HGN ACO will work with the Center for State Health Policy to define the Benchmark period. Based on our initial assessment we expect the Benchmark period to include two years of claims data from 2013 and 2014.

B. Savings:

The ACO cost savings methodology follows recommendations developed by Rutgers Center for State Health Policy (CSHP). Total costs for a base year are compared against expected costs based on past experience. If there is a reduction in cost for fee for service Medicaid patients, the ACO receives a portion of the savings for reallocation and reinvestment in the health of the community.
The ACO will reinvest its portion of any shared savings in activities that further the objectives of the ACO Demonstration Project, including payments for improved quality and patient outcomes, interdisciplinary collaboration for complex patients, expanded access for high-risk patients, health education and literacy, community prevention activities, support for the infrastructure of the ACO, and expansion of medical and behavioral healthcare workforces and services.

C. Savings:

HGN ACO will follow the savings model recommended in the “Recommended Approach for Calculating Savings in the NJ Medicaid ACO Demonstration Project” as published by Derek DeLia, Ph.D. and Joel C. Cantor, Sc.D. from the Center for State Health Policy and based on the Chronic Disability and Illness Payment System (CDPS) economic risk framework from the Agency of Healthcare Research and Quality.

D. Distribution:

HGN ACO will structure a distribution methodology defining the percentage of savings that the HGN ACO providers will be eligible to receive of the net shared savings accrued from fee for service Medicaid patients only, with the balance remaining to be distributed to the MCO’s. Providers from the following institutions/organizations may be eligible to receive payments:

- Newark Beth Israel Medical Center
- University Hospital
- St Michaels Medical Center
- Newark Community Health Centers, Inc.
- University Physician Associates and New Jersey Medical School Rutgers University of Behavioral Health Care
- Visiting Nurses Association Health Group
- Integrity House

E. Impact:

Some Medicaid ACO activities are expected to reduce hospital inpatient admissions, which could reduce hospital revenues. The anticipated savings are expected to offset any reduced hospital revenue.

Section 5: Annual Reporting

A. Annual reporting:

HGN ACO will submit an annual report outlining successes and lessons learned. Projected savings with a detailed distribution of savings resulting from the case management of fee for service Medicaid patients will also be reported to the ACO partners as well as any MCO partners. A list of expenditures made during the year will be included as well as any plans for additional organizational investment. As quality measures are gathered over time, performance measures
and trends will be included at the practice level and for the ACO as a whole. In year two, patient experience information will be included.

Section 6: Attachments

A. Support – other healthcare institutions:

Newark Beth Israel Medical Center
Newark Beth Israel Medical Center Children’s Hospital
University Hospital
St Michaels Medical Center

See Letters of Support – Attachment 1
Attachment 1

Letters of Support
June 26, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Hospital Participant Letter of Support

Dear Commissioner Velez,

As President and CEO of University Hospital, I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow-up and coordination;
5. My providers’ acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;
6. My providers’ acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;
7. Commitment to abide by the ACO’s antitrust compliance policy; and
8. My organization’s commitment to cooperate with and participate in the annual evaluation.
Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

James R. Gonzalez, MPH, FACHE
President & CEO
June 24, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Qualified Primary Care Physician Letter of Support

Dear Commissioner Velez,

As President and Chief Executive Officer of Newark Beth Israel Medical Center and Children’s Hospital of New Jersey, and Executive Vice President of Barnabas Health, I am pleased to present the following letter of support for the Medicaid ACO on behalf of our institution’s qualified primary care physicians, according to the definition outlined in the Medicaid ACO Demonstration Project. Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow-up and coordination;
5. The provider’s acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;
6. The provider’s acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to
care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;
7. Commitment to abide by the ACO’s antitrust compliance policy; and
8. The provider’s commitment to cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

[Signature]

John A. Brennan, MD, MPH
President and Chief Executive Officer
Newark Beth Israel Medical Center and Children’s Hospital of New Jersey
Executive Vice President, Barnabas Health
## Newark Beth Israel Medical Center
### Children's Hospital of New Jersey
#### Barnabas Health

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<td>Ann Bag-ao, APRN</td>
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<td>Fletta A. Burgess-Okolie, APRN</td>
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<td>Lisa M. Cassidy, APRN</td>
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<td>Robert Lahita, MD, PhD</td>
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<td>Alexander J. Welch, APRN</td>
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201 Lyons Avenue at Osborne Terrace • Newark, NJ 07112 • 973.926.7000 • www.barnabashealth.org

*Newark Beth Israel Medical Center and Children’s Hospital of New Jersey are major teaching affiliates of UMDNJ — New Jersey Medical School*
# Newark Beth Israel Medical Center
## Children's Hospital of New Jersey
### Barnabas Health

**JOHN A. BRENNAN, MD, MPH**  
President and Chief Executive Officer  
Newark Beth Israel Medical Center  
Children's Hospital of New Jersey  
Executive Vice President, Barnabas Health

**BARRY H. OSTROWSKY**  
President and Chief Executive Officer  
Barnabas Health

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Newark Beth Israel Medical Center and Children's Hospital of New Jersey are major teaching affiliates of UMDNJ – New Jersey Medical School
# Physician Roster

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June 23, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Hospital Participant Letter of Support

Dear Commissioner Velez,

As President and CEO of Saint Michael's Medical Center, a 357-bed regional tertiary-care, teaching, and research center in the heart of Newark's business and educational district, I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
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and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;

6. My providers’ acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;

7. Commitment to abide by the ACO’s antitrust compliance policy; and

8. My organization’s commitment to cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

David A. Ricci
June 25, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Hospital Participant Letter of Support

Dear Commissioner Velez,

As President and Chief Executive Officer of Newark Community Health Centers, Inc. (NCHC), I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

NCHC is a network of federally qualified health care centers that has been providing comprehensive primary care services to children and adults who reside in the City of Newark and surrounding communities for over twenty-seven years. With seven health centers located in Newark, East Orange, Orange, and Irvington, NCHC’s goal is to meet the healthcare needs of the communities in which we serve and help people live stronger, healthier and happier lives.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow-up and coordination;
5. My providers’ acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment...
and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;

6. My providers’ acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;

7. Commitment to abide by the ACO’s antitrust compliance policy; and

8. My organization’s commitment to cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

Pamela Clarke, PhD, MBA
President and Chief Executive Officer
June 9, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Qualified Primary Care Physician Letter of Support

Dear Commissioner Velez,

As Dean of Rutgers New Jersey Medical School, I am pleased to present the following letter of support for the Medicaid ACO on behalf of our institution's qualified primary care physicians, according to the definition outlined in the Medicaid ACO Demonstration Project. Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO's reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow-up and coordination;
5. The provider's acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;
6. The provider's acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;
7. **Commitment to abide by the ACO's antitrust compliance policy**; and
8. The provider's commitment to cooperate with and participate in the annual evaluation.
Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

[Signature]

Robert L. Johnson, MD, FAAP
The Sharon and Joseph L. Muscarelle Endowed Dean
Rutgers New Jersey Medical School
June 11, 2014

Jennifer Velez, Esq.
Commissioner
New Jersey Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Behavioral Health Provider Letter of Support

Dear Commissioner Velez:

As CEO of Rutgers University Behavioral Health Care (UBHC), I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

As you know, UBHC is now part of Rutgers University and is New Jersey’s largest behavioral health organization. In Newark we provide emergency screening services, mobile outreach for youth, partial hospital, outpatient and grant-funded residential services.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow up and coordination;
5. The provider's acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;
6. The provider’s acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;
7. Commitment to abide by the ACO’s antitrust compliance policy; and
8. The provider’s commitment to cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

Christopher Kosseff
President and CEO, UBHC
June 23, 2014

Jennifer Velez, Esq,
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Behavioral Health Provider Letter of Support

Dear Commissioner Velez,

As President and CEO of Integrity House, I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

Integrity House has been in the Newark community for over 43 years and is currently the largest licensed agency in the city serving those plagued by substance abuse and co-occurring disorders. Integrity offers a full continuum of care including Residential, Halfway House, and Outpatient services. At Integrity, we are committed to helping clients and their families through comprehensive therapeutic community addictions treatment and recovery support. Integrity House has specialized staff with strong experience in substance abuse and mental health treatment. This includes the Director of Substance Abuse Counseling Brian Gamarello, LCADC, therapists Joseph Butler, LCSW, Charlotte Forrest, LCSW, Lurleen Holder, LCSW, Thomas Coleman, Practicing Psychologist, Stuart Diaz, LCSW, and Joseph Sweeney, LCADC, LCSW.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commit to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commit to support the Demonstration Project objectives;
3. Commit to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commit to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, patient care, tracking, follow-up and coordination;

Integrity, Inc. • 103 Lincoln Park • PO Box 510 • Newark, New Jersey 07101

Newark (973) 623-0600 • Secaucus (201) 595-7100
fax (973) 623-1802 • fax (201) 583-7114

Commission on Accreditation of Rehabilitation Facilities

CARF

Adult Resitential Treatment
Adolescent Residential Treatment
Intensive Outpatient Treatment
Partial Day Treatment
Adult Outpatient Treatment
Prevention Services
Outpatient Treatment
5. Acknowledge that, notwithstanding any Demonstration Project objectives, Integrity House shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;

6. Acknowledge that, consistent with Demonstration Project objectives, Integrity House shall not organize care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;

7. **Commit to abide by the ACO’s antitrust compliance policy; and**

8. Cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

[Signature]

Robert J. Budaock
President and CEO
June 30, 2014

Jennifer Velez, Esq.
Commissioner, NJ Department of Human Services
222 South Warren Street
PO Box 700
Trenton, NJ 08625-700

Re: Greater Newark Medicaid ACO Behavioral Health Provider Letter of Support

Dear Commissioner Velez,

As President and CEO of Visiting Nurse Association Health Group I am pleased to present the following letter of commitment to participate in the Medicaid ACO Demonstration Project in Greater Newark.

As New Jersey’s largest nonprofit community health provider for home health and hospice, we have served the community for over 100 years, caring for over 120,000 individuals each year. VNA Health Group has been part of the Greater Newark Health Care Coalition collaboration since its inception in 2009. We look forward to the commitment of continuing the relationship with GNHCC as a key partner for the Accountable Care Organization.

Through this letter, my staff and I commit to participate in the Healthy Greater Newark ACO in the following ways:

1. Commitment to participate in the program for the full length of the Demonstration Project (up to 3 years);
2. Commitment to support the Demonstration Project objectives;
3. Commitment to provide timely information to meet the ACO’s reporting requirements, including quality measures;
4. Commitment to share patient medical information with participating ACO members, pursuant to necessary data sharing agreements, including objectives, including patient care, tracking, follow-up and coordination;
5. The provider’s acknowledgement that, notwithstanding any Demonstration Project objectives, the provider shall retain responsibility for medically appropriate treatment and referral decisions, document the basis for such decisions, and not limit treatment and referrals to providers participating in the ACO if treatment or referral to outside providers is medically indicated;

VNA Health Group
The future of healthcare. Delivered.
6. The provider’s acknowledgement that, consistent with Demonstration Project objectives, the provider shall not organize his or her care delivery to reduce access to care or increase costs, but instead shall work to improve health outcomes and quality while reducing unnecessary and inefficient spending;

7. Commitment to abide by the ACO’s antitrust compliance policy; and

8. The provider’s commitment to cooperate with and participate in the annual evaluation.

Please feel free to follow up if I can answer any additional questions. Our team looks forward to participating in a successful Medicaid ACO Demonstration.

Sincerely,

Steven Landers
Attachment 2
Quality Plan
## Healthy Greater Newark ACO Quality Plan

<table>
<thead>
<tr>
<th>TIMELINE</th>
<th>GOAL/OBJECTIVE</th>
<th>BENCHMARK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>Form a Quality Committee</td>
<td>Quality Committee will begin meeting monthly, as evidenced by meeting minutes</td>
</tr>
<tr>
<td>Q1</td>
<td>Work with HIE (NJIT) and clinical partners on existing and projected capacity for collection of Quality Measures</td>
<td>HIE Committee of GHHCC and ACO Quality Committee will develop outline for data collection</td>
</tr>
<tr>
<td>Q1</td>
<td>Establish consensus around the Quality Committee’s purpose, scope and decision-making structures</td>
<td>Quality Committee will present a vision statement, charter and goals to the full Board</td>
</tr>
<tr>
<td>Q1</td>
<td>Establish a common set of quality standards for ACO members</td>
<td>Quality Committee will present quality measure recommendations to the Board</td>
</tr>
<tr>
<td>Q2</td>
<td>Align quality measures will deliverables for gainsharing plan</td>
<td>Quality Committee and Medical Director will work with Executive Director and full Board to ensure programmatic goals and evaluation (quality measures) are aligned</td>
</tr>
<tr>
<td>Q2</td>
<td>Establish policies to address failures to meet required measures</td>
<td>Quality Committee will complete its proposed remediation policies</td>
</tr>
<tr>
<td>Q2</td>
<td>Establish mechanisms for soliciting and responding to patient feedback</td>
<td>Quality Committee will prepare patient feedback proposal, with input from Community Engagement Committee</td>
</tr>
<tr>
<td>Q2</td>
<td>Seek Board approval for Quality Committee’s proposals</td>
<td>Board approval of quality measures, remediation policies, and patient feedback proposal</td>
</tr>
<tr>
<td>Q3/Q4</td>
<td>Educate members of the ACO on quality measures and policies</td>
<td>Quality Committee will conduct in-person training with ACO members; ACO members will sign Participation and Disbursement Agreements</td>
</tr>
<tr>
<td>Q3/Q4</td>
<td>Retain third-party vendors as needed to support the ACO’s quality efforts</td>
<td>Execute contracts for services with vendors</td>
</tr>
<tr>
<td>End of Year 1</td>
<td>Measure the quality baseline for ACO providers</td>
<td>Conduct initial quality evaluation</td>
</tr>
</tbody>
</table>