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Creating an Agency Coordination Plan for Care Compass Network

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Megan Griffiths, Department of Public Administration
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Introduction
Care Compass Network (CCN) is a new non-profit organization that partners with local hospitals, community-based organizations, and local government units whose aim is to transform the way Medicaid beneficiaries receive benefits from New York State.

As a part of New York State’s Delivery System Reform Incentive Program (DSRIP), Care Compass Network collaborates with various agencies throughout a nine-county Performing Provider System (PPS) in the Southern Tier of New York.

My capstone project is to develop an Agency Coordination Plan for CCN, which the organization must submit to New York State in order to meet requirements. This plan will guide their current and future partnerships with local government agencies.

Methodology
In order to determine barriers that agencies face, an online survey was sent out to agency leaders throughout the nine-county area. One leader opted to do a phone interview instead of the online survey. The surveys and interviews yielded both qualitative and quantitative data. The agency leadership were asked about:

- The type of services their agency provides
- Their current level of understanding of DSRIP
- Their familiarity with the CCN contracting process
- The status of their contract with CCN
- What barriers they faced if they did contract with CCN
- If they have not contracted, what is holding them back from doing so
- The impact of CCN’s funding model on the contracting process
- The number of people in their agency a partnership with CCN would impact
- The benefits and disadvantages to partnering with CCN
- What they expect from CCN staff
- Any additional suggestions they had for they have for effective partnership

Sample and Limitations
Sample
- Sample Size: 30
- Respondents: 12 (11 via survey, 1 via interview)
- Response Rate: 40%

Limitations
- Low response rate
- Not all respondents answered all questions
- Respondents may not be representative of agencies in different areas of the nine-county region

Findings
There were three major barriers identified by survey respondents and the interviewee:

1. Legal Barriers- contracts are delayed when submitted to county legal departments.
2. Reimbursement Barriers- the complexity of how agencies are reimbursed from CCN and NYS play a role in the contracting process.
3. Lack of Workforce- agencies lack the manpower to adequately meet the contracting requirements (such as attending meetings and added reporting) of CCN.

Out of the 12 respondents, 6 have partnered with CCN and 6 have not. A majority of those that have partnered reported no barriers, while a majority of those who have not reported the workforce barrier.

Conclusions
Many of the barriers are out of the control of both CCN and the partnering local government department:

- Leaders’ hands become tied when they are waiting for their county’s legal departments to approve contracts.
- Neither CCN nor local governments can navigate around New York State Medicaid Reimbursement rules and regulations.
- The local government departments cannot simply increase their workforce due to lack of funding from New York State. This makes it difficult for them to create effective partnerships with organizations such as CCN. Agencies do not have the time to complete all reporting requirements that a CCN partnership requires.

Recommendations
While many of the barriers are out of the control of CCN and the local government agencies, CCN can take the following steps to ensure more effective partnerships:

1. Create an online platform that allows agencies to “attend” meetings at their convenience: Having an online platform would save time for agencies and could encourage partnership from agencies that are concerned over lack of workforce.
2. Become more familiar with each entity and their needs: The problems that agencies face in Binghamton may not be the same for ones in more rural regions, such as Chenango County.
3. Collaborate with other PPSs: Learning how other PPSs navigate barriers in their region could lead to strategies and solutions for CCN.

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