

ATTACHMENT B

DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM COMMUNITY PARTNER (CP) BP2 ANNUAL REPORT RESPONSE FORM

PART 1: PY2 ANNUAL REPORT EXECUTIVE SUMMARY

General Information

Full CP Name:	Boston Allied Partners
CP Address:	1 BMC Place, Boston, MA 02118

Part 1. PY2 Annual Report Executive Summary

The Boston Allied Partners LTSS Community Partner program (BAP) had an eventful year. Our team responded to many operational changes admirably. We were able to maintain our financials, operations, trainings, technology and quality management efforts as expected and with minimal change. We engaged on a new workforce development project with UMass Medical School and observed a robust Consumer Advisory Board presence.

Technology. BAP management and ACT.md agreed to mutually terminate our agreement. Observing the many operational changes and improvements being instituted by EOHHS and the market consolidation of the CPs (both LTSS and BH) resulted in a decision to migrate to a new EMR vendor. BAP Management Team chose to enter into a new agreement with eHana.

Workforce Development. BAP staff completed all state mandated trainings in addition to trainings deemed appropriate by the BAP Management Team. The standardization of EOHHS mandatory trainings as online webinar modules enabled staff to complete the trainings in a timely manner and helped to maintain consistency of knowledge across all of our BAP CP Affiliated Partner organizations. BAP and UMass Medical School teamed up to create a tailored training for BAP staff utilizing DSRIP TA money.

ACO/MCO Integration. Overall, BAP experienced a marked improvement in communication with our ACO and MCO partners from BP1 to BP2. We perceived an increase in ACO/MCO responsiveness, willingness to help with challenges that arose, and interest in continued efforts to streamline communication. We hope to continue this forward progress into BP3.

Quality Management. The biggest quality barrier in BP2 was not having baseline or benchmark data for our Quality Measures slate. While we have metrics about our program, not being able to draw comparisons means that we are limited in our ability to embark on programmatic improvement initiatives that will have an effect on the current quality slate. Similarly, knowing these baselines would help advance the work of our Quality Management Committee and help us understand where we are doing well and where we could improve.

Despite not having baseline information, the BAP Quality Management Committee met once per quarter throughout BP2 to review our Quality Improvement deliverables and to review several programmatic performance indicators as described in our full annual report. Across the board, stakeholders of BAP, including the Quality Management Committee, believe that the program is doing quite well.

Consumer Advisory Board. All subcommittees are operating well, teams are collaborating closely and Consumer Advisory Board feedback has been positive.

In the coming year, we look forward to strengthening our ACO relationships and finding creative solutions to improving administrative processes and continuing to improve our financial position.