



**Delivery System Reform
Incentive Payments (DSRIP)
Program Update**

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Delivery System Reform Incentive Payments (DSRIP) Program

- **Goal:** Support California's public hospitals efforts in transforming their delivery system to meaningfully enhance the quality of care.
- 21 designated public hospital systems; \$3.3 B potential payments to hospitals over 5 years
- Four areas for which funding is available:
 1. Infrastructure Development
 2. Innovation and Redesign
 3. Population-focused Improvement
 4. Urgent Improvement in Care



Advancing Population Health Management

- Patient/Care Giver Experience
- Coordinated Care (diabetes, CHF, COPD)
- Preventive Services (mammography, flu, peds BMI, smoking cessation)



Improving Patient Safety

- Sepsis Management
- Central Line Infection
- Surgical Site Infection
- Pressure Ulcer Prevention
- Stroke Management
- Falls-Related Injury Prevention



Lessons Learned

- Managing as a system (CMS, DHCS, CAPH/SNI, 21 public hospitals)
- Real-world variation
- Using Continuous Quality Improvement
- Fostering learning organizations and collaboratives



DSRIP Initiatives Under Development

- Category 5 HIV Transition DSRIP
 - Approved by the Centers for Medicare and Medicaid Services (CMS) in June 2012 as an amendment to the 1115 Waiver
 - Establishes additional Category 5 DSRIP projects that support the transition of LIHP enrollees with HIV
 - \$82 M in federal funding available to hospitals



DSRIP Initiatives Under Development

- Non-Designated Public Hospital (NDPH) DSRIP
 - Proposal under 2012-13 State Budget
 - Amendment under CMS review to:
 - Test delivery system reform projects through DSRIP in 46 non-designated public hospitals; up to \$165 M in federal funds available for NDPHs.



Conclusions

- The DSRIP program is preparing California for 2014 by:
 - Expanding capacity to improve access
 - Enhancing quality
 - Improving population health
 - Containing costs

