



**VAP EXCEPTION FORM IS DUE 10/14/2014 - NO EXTENSIONS WILL BE GRANTED**

State of New York Department of Health  
 Delivery System Reform Incentive Payment (DSRIP) Program  
 Vital Access Provider Exception Form

**Vital Access Provider Exception:** The state will consider exceptions to the safety net definition on a case-by-case basis if it is deemed in the best interest of Medicaid members. Any exceptions that are considered must be approved by CMS and must be posted for public comment 30 days prior to application approval. Three allowed reasons for granting an exception are shown in Section IV.

I. Are you a Medicaid Provider  
 Answer Yes  No

II. Appeal Applicant Information

Organization Name: The Mary Imogene Bassett Hospital DBA Bassett Medical Center  
 Joined PPS: Mary Imogene Bassett Hospital

Provider Type: Hospital  
 Provider Type - Other: Outpatient Services

Operating Certificate/License #: 3824000H MMSL\*  
 Unique Identifiers: 3824000H 03000593 NPI\*  
 Agency Code: 1780600577

Billing Entity ID: Mary Imogene Bassett Hospital d/b/a Bassett Medical Center  
 Address: 1 Awell Road City: Cooperstown State: NY Zip: 13326

III. Appeal Point of Contact

Contact Person: Michael Tengeres  
 Title: Corporate Vice-President and Chief Financial Officer  
 Contact Phone: 607-547-3635 Extension:  
 Contact Email: michael.tengeres@bassett.org

IV. Please choose the following VAP Exception:

i A community will not be served without granting the exception because no other eligible provider is willing or capable of serving the community.  
 ii Any hospital is uniquely qualified to serve based on services provided, financial viability, relationships within the community, and/or clear track record of success in reducing avoidable hospital use.  
 iii Any state-designated health home or group of health homes. \*\*

When choosing VAP Exception i & ii - Please indicate what Performing Provider System (PPS) you plan on joining. If you do not indicate what PPS you intend to join, then you will be denied. Please indicate the name of the PPS in the "Appeal Applicant Information - Section II". If you are part of multiple PPS, see section VII tab.

\*\* When choosing VAP Exception III - The Department has submitted a draft list of State Designated Health Homes and Network Care Management Agencies (CMAs) that have already been approved as safety net providers as well as those that are pending CMS approval. If your Health Home appears on this list as pending approval, you will be granted a VAP exception pending CMS approval and do not need to submit this form. If the organization operating your Health Home/CMA already appears on another safety net list, you do not need to submit this form. If your organization does not appear on the draft Health Home list or on another approved safety net provider list, but your organization believes that it should qualify as a Health Home, please complete this form. List is available on the DSRIP website.

\*\* For Section IV, if you are joining more than one PPS, use second tab (Section VII) to add additional PPS.

V. Percentage of Medicaid & Uninsured members that your facility serves

Percentage	Medicaid (FSS & MC)	Uninsured	Data Source	Year
20%		2%	Billing records	2014

VIII. Yes I hereby certify that the information and data provided on this form is accurate and correct to the best of my knowledge. I understand that this information may be subject to audit and I may be asked to provide documentation in support of this appeal.

Answer \_\_\_\_\_

You have chosen the following VAP Exception: ii

VI. Restricted to 3500 Characters only! - Please read instructions for clarification!

~ The VAP Exception relies heavily on the statement you provide, so please be concise and thorough~

You chose qualification ii, in the space below please include all of the following that apply to your Hospital:

- a. A description of the applicant's niche services that would enhance the network of services for the PPS.
- b. A financial viability analysis (attach as PDF in the email when submitting)
- c. An identification of and description of how the applicant's relationships within the community that would enhance PPS' success.
- d. Demonstration of past success in reducing avoidable hospital use
- e. Any supporting documentation to substantiate your narrative (attach as PDF in the email when submitting)

Character Count: 3405

The Mary Imogene Bassett Hospital (d/b/a Bassett Medical Center (BMC)) is serving as Lead Entity for the Mary Imogene Bassett Hospital DBA Bassett Medical Center PPS (PPS). The New York State Department of Health (DOH) issued to BMC a DSRIP Project Award Letter (PPS Lead) dated May 7, 2015. BMC is a New York Public Health Law Article 28 hospital and designated as a Safety Net provider serving as PPS Lead Entity for Otsego, Schoharie, Delaware, Madison, and Herkimer Counties under the PPS. BMC is a not-for-profit and tax-exempt organization. BMC provides the following network services for the PPS:

- (1) Administration of PPS including, but not necessarily limited to, general administrative support and project implementation; oversight of project metrics; liaison with NYSDOH and other State and Federal entities as required for PPS administration; operational expertise with regard to PPS and project oversight and administration
  - (2) Compliance program implementation and oversight
  - (3) Data and Information Security
  - (4) Medical Director services for PPS
  - (5) Marketing and communication of PPS wide initiatives
  - (6) Accounting and auditing
  - (7) Information technology support
  - (8) Project management
  - (9) Legal services
  - (10) Office and conference room space
- Under the collaborative contracting model selected by the PPS, BMC has entered into approximately 65 written DSRIP PPS Partner Agreements (Partner Agreements) with various PPS Partners (Partners). In order to enhance the provision of those services and segregate DSRIP operations from BMC's hospital operations, BMC is proposing to form a New York limited liability company to be known as Bassett PPS, LLC (DBA Leatherstocking Collaborative Health Partners, LLC). The sole purpose of the LLC will be to function as Lead Entity for the PPS in lieu of BMC. The LLC will be operated under the principles of a tax-exempt and non-profit organization. Upon formation, the LLC will seek tax-exempt status under the Internal Revenue Code. Formation of the LLC is a further step in the evolution of the PPS governance structure under the approved collaborative contracting model. BMC will be the sole member of the LLC. As such, BMC will retain reserve powers including, but not limited to, determining the DSRIP funds flow methodology for the PPS for distribution of funds to partners. The funds flow will be controlled by BMC as a sole member of the LLC with a restriction of up to 5% of funds directly flowing to non-safety net providers. As noted earlier, the LLC will conduct business under the assumed name of Leatherstocking Collaborative Health Partners (LCHP).

The LLC will be governed by a five-member board of managers who will be appointed by BMC. The board of managers will conduct the day-to-day operations of the LLC in its role as Lead Entity for the PPS. Attached in PDF format is a governance structure diagram. The Partner Agreements will be assigned by BMC to the LLC. The language of said assignment is outlined in the partner agreements. Formation of the LLC to serve as Lead Entity is vital to ensuring the efficient operation of the PPS so as to achieve its ultimate goal of creating a high-performing, integrated delivery system. The LLC will adopt a comprehensive written compliance program that satisfies the requirements of New York's Social Services Law §363-d and 18 NYCRR 521.

Name

Michael Tengeres

Title

Corporate Vice-President & Chief Financial Officer

Only appeals from the CEO, CFO or comparable will be accepted

Yes  No