A Blueprint for Success in Today’s Value-Based Care Model

Clinical Integration
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Mount Sinai Health Partners (MSHP)

2,400
About 2,400 full time faculty physicians

Integration with ASCs & FQHCs across New York City

1,200
About 1,200 voluntary physicians

Geographic access and coverage across the five boroughs, Long Island and beyond

300
More than 300 community locations

Committed to a vision of transforming health care in New York towards value-based care and population health

Join Us!
To schedule an in-office appointment with our physician engagement team, please contact Mount Sinai Health Partners at 877-234-6667 or email us at MSHP@mountsinai.org

Questions?
To view answers to frequently asked questions about our clinical integration program, visit https://mshp.mountsinai.org/clinical-integration-faqs/
Mount Sinai Health Partners’ Clinically Integrated Network
(MSHP CN) is a collaboration among physicians (including independent/private practice physicians and physicians employed by Mount Sinai Health System) to develop an active and ongoing program of clinical initiatives to improve the quality and delivery of health care services. At MSHP, we believe physicians have the knowledge, skill, and experience needed to achieve improvements in quality and efficiency, and place physicians at the center of shaping and driving change.

MSHP is physician-led and governed, with physicians constituting the majority of members of its Board of Managers. The Board is charged with developing mechanisms to monitor and improve the utilization, cost, and quality of services that MSHP CN physicians deliver to their patients.

Benefits to Your Practice

MSHP will collectively negotiate with payers on behalf of physicians who clinically integrate via the MSHP CN for contracts that may include:

- Payments for successful care coordination
- Increased fee-for-service rates based on performance
- Incentive payments for performance improvement initiatives
- Shared savings based on reductions in total care costs

Putting Clinical Integration into Practice

The goal of the MSHP Clinical Integration Program is to provide better, more accountable, efficient care to help participating physicians achieve true clinical excellence, while engaging payers to recognize this value.

Participation in the quality and care management initiatives of the Clinical Integration Program will require time and attention from physicians and their staff. Data collection is required to measure physician performance against clinical benchmarks established by their physician colleagues on the Clinical Integration Quality Committee and Board of Managers. In return, participating physicians may be eligible to participate in shared savings arrangements. The size of incentive payments will depend on both the physician’s personal performance and the overall performance of the MSHP CN.

CIN Participation Requirements

Mandatory Foundational Requirements

1. Care Coordination: Signing a “Care Compact” that provides a framework for better communication and safe transition of care between primary, specialty, and acute care providers (first year only).

2. Program Engagement: Providing an actively used email address for program communications (first year only).


4. Program Education: Attending an in-person Clinical Integration Physician Roundtable/Town Hall presentation or completing an online MSHP Clinical Integration 201 module.

5. Practice Engagement: Meet with a provider engagement executive monthly for PCPs (minimum 10/year) and twice yearly for specialists.

6. Documentation: Participating in the Clinical Documentation QI Program (1 hour).

Payer Arrangements

MSHP currently participates in the following value-based arrangements and contracts:

- Astra Commerical and Medicare
- Cigna Commercial
- Empire BlueCross BlueShield Commercial and Medicare
- Humana Medicare
- Mount Sinai Health System Employee Health Benefit Plan administered by Empire BlueCross BlueShield
- Oscar Commercial
- United/Overseas Commercial and Medicare
- 1199SEIU National Benefit Fund for Health and Human Service Employees