NEW YORK STATE | Department of Health | Medicaid Redesign Team

New York State Department of Health
Delivery System Reform Incentive Payment (DSRIP) Program

Print Summary

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Achievement Value (AV) Scorecard
Central New York Care Collaborative, Inc.

PPS Information	
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015
PPS	Central New York Care Collaborative, Inc.
PPS Number	8

Achievement Value (AV) Scorecard Summary

Project Link (click on the purple link below to access each individual project report)	AV Data				Payment Data			
	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	*Organizational funds are embedded within each project's payment*			
2.a.i	20.00	20.00	0.00	20.00	$709,727.47	$709,727.47	$ -	$709,727.47
2.a.iii	21.00	21.00	0.00	21.00	$582,990.42	$582,990.42	$ -	$582,990.42
2.b.iii	20.00	20.00	0.00	20.00	$544,969.30	$544,969.30	$ -	$544,969.30
2.b.iv	20.00	20.00	0.00	20.00	$544,558.13	$544,558.13	$ -	$544,558.13
2.d.i	9.00	9.00	0.00	9.00	$471,220.67	$471,220.67	$ -	$471,220.67
3.a.i	15.00	15.00	0.00	15.00	$494,274.49	$494,274.49	$ -	$494,274.49
3.a.ii	16.00	16.00	0.00	16.00	$468,927.08	$468,927.08	$ -	$468,927.08
3.b.i	12.00	12.00	0.00	12.00	$363,360.48	$363,360.48	$ -	$363,360.48
3.g.i	10.00	10.00	0.00	10.00	$278,821.50	$278,821.50	$ -	$278,821.50
4.a.iii	16.00	16.00	0.00	16.00	$253,474.10	$253,474.10	$ -	$253,474.10
4.d.i	32.00	32.00	0.00	32.00	$304,168.91	$304,168.91	$ -	$304,168.91

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Achievement Value (AV) Scorecard
Central New York Care Collaborative, Inc.

AV Adjustments (Column F)								
Total	**191.00**	**191.00**	**0.00**	**663.00**	**$5,016,493**	**$5,016,493**	**$ -**	**$5,016,493**

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New York State Department of Health
Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Domain I Organizational Scoresheet						
Domain I Organizational	**Review Status**	**AVs Available**	**AVs Awarded**	**Adjustments**	**Net AVs**	**AV**
Workforce Strategy	Complete	1.00	1.00	0.00	1.00	100%
Section 01 - Budget	Complete	1.00	1.00	0.00	1.00	100%
Section 02 - Governance	Complete	1.00	1.00	0.00	1.00	100%
Section 03 - Financial Sustainability	Complete	1.00	1.00	0.00	1.00	100%
Section 04 - Cultural Competency & Health Literacy	Complete	1.00	1.00	0.00	1.00	100%
Section 05 - IT Systems and Processes	Complete	N/A	N/A	N/A	N/A	N/A
Section 06 - Performance Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Section 07 - Practitioner Engagement	Complete	N/A	N/A	N/A	N/A	N/A
Section 08 - Population Health Management	Complete	N/A	N/A	N/A	N/A	N/A
Section 09 - Clinical Integration	Complete	N/A	N/A	N/A	N/A	N/A
Section 10 - General Project Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Total	**Complete**	**5.00**	**5.00**	**0.00**	**5.00**	**100%**

Net Organizational AVs Awarded: 5 out of 5

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Workforce Strategy							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Workforce Strategy Budget Updates							
		1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	

Additional Workforce Strategy Budget Updates							1
		2. Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing	
		3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing	
		4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	N/A	N/A	In Process	Pass & Ongoing	
		5. Develop training strategy	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce Strategy Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 01 - Budget

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Quarterly Project Reports, Project Budget and Flow of Funds		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1
		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Total	1

Section 02 - Governance							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Governance Structure Updates	🟢	1. Finalize governance structure and sub-committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	1
	🟢	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
	🟢	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process Update	🟢	4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Additional Governance Milestones (non AV-driving)	🔴	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	6. Finalize partnership agreements or contracts with CBOs	N/A	3/31/2016	In Process	Pass & Ongoing	
	🔴	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	6/30/2016	In Process	Pass & Ongoing	

driving)							
		8. Finalize workforce communication and engagement plan	N/A	6/30/2016	In Process	Pass & Ongoing	
		9. Inclusion of CBOs in PPS Implementation	N/A	3/31/2020	In Process	Pass & Ongoing	
Additional Governance Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Section 03 - Financial Sustainability							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	In Process	Pass & Ongoing	1
	●	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	●	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
PPS Transition to Value Based Payment System	●	4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	●	5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
Additional	●	6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	TBD	N/A	N/A	N/A	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

PPS Transition to Value Based Payment System	🟢	7. Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	TBD	N/A	N/A	N/A	N/A
	🟢	8. ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs	TBD	N/A	N/A	N/A	
Additional Financial Stability Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Section 04 - Cultural Competency & Health Literacy							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Cultural Competency /Health Literacy	🟢	1. Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	In Process	Pass & Ongoing	1
	🟢	2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	6/30/2016	In Process	Pass & Ongoing	
Additional Cultural Competency /Health Literacy Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

Total			**1**

Section 05 - IT Systems and Processes							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
IT Systems and Processes		1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
		2. Develop an IT Change Management Strategy.	N/A	3/31/2016	In Process	Pass & Ongoing	
		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	12/31/2016	In Process	Pass & Ongoing	
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	In Process	Pass & Ongoing	
		5. Develop a data security and confidentiality plan.	N/A	12/31/2015	In Process	Pass & Ongoing	
		This milestone is Pass and Ongoing pending final review of security workbooks by DOH					
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Additional IT Systems and Processes Topic Areas		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	N/A
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 06 - Performance Reporting							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Performance Reporting		1. Establish reporting structure for PPS-wide performance reporting and communication.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Additional Performance Reporting Topic Areas		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	N/A
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 07 - Practitioner Engagement

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Practitioner Engagement		1. Develop Practitioners communication and engagement plan.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
		2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	N/A	6/30/2016	Not Started	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Additional Practitioner Engagement Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 08 - Population Health Management							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Population Health		1. Develop population health management roadmap.	N/A	9/30/2015	In Process	Pass & Ongoing	N/A
		2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	Not Started	Pass & Ongoing	N/A

							N/A
Additional Population Health Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 09 - Clinical Integration							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Clinical		1. Perform a clinical integration 'needs assessment'.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A

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Central New York Care Collaborative, Inc. - Domain 1 Organizational AVs

Integration		2. Develop a Clinical Integration strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.i

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.i
Project Title	Create an Integrated Delivery System focused on Evidence Based Medicine and Population Health Management

Payment Snapshot		
Payment Available (DY1)	$	3,548,637.33
DY1 Payment Earned to Date	$	2,129,182.40
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	1,419,454.93
Funding Available for Distribution DY1Q2	$	709,727.47

2.a.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	354,864	354,864
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**354,864**	**354,864**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	354,864	354,864
	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**15.00**	**15.00**	**100%**	**20%**	**10%**	**354,864**	**354,864**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**709,727**	**709,727**

Total Project 2.a.i AVs Awarded: 20 out of 20

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Domain 1 Project Milestones - Project 2.a.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	N/A
Total						**0.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.i

Domain 1 Project Prescribed Milestones - Project 2.a.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
●	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.i

●	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2019	3/31/2017	Not Started	Pass & Ongoing	N/A
●	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
●	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2019	3/31/2019	Not Started	Pass & Ongoing	N/A
	Total					**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333

●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1

	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.i

●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total			**15.00**

NEW YORK STATE | Department of Health | Medicaid Redesign Team

New York State Department of Health
Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.iii

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iii
Project Title	Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services

Payment Snapshot	
Payment Available (DY1)	$ 2,914,952.09
DY1 Payment Earned to Date	$ 1,748,971.26
DY1 Payment Not Earned to Date	$ -
DY1 Funding Remaining	$ 1,165,980.84
Funding Available for Distribution DY1Q2	$ 582,990.42

2.a.iii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	291,495	291,495
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**10%**	**291,495**	**291,495**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	291,495	291,495
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**15.00**	**15.00**	**100%**	**20%**	**10%**	**291,495**	**291,495**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**20%**	**582,990**	**582,990**

Total Project 2.a.iii AVs Awarded: 21 out of 21

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Domain 1 Project Milestones - Project 2.a.iii

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.iii

●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.a.iii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
●	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
●	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
●	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A

	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333

●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1

	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.a.iii

Total	**15.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iii

Project Snapshot	
Project Domain	System Transformation Projects
Project ID	2.b.iii
Project Title	ED care triage for at-risk populations

Payment Snapshot		
Payment Available (DY1)	$	2,724,846.52
DY1 Payment Earned to Date	$	1,634,907.91
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	1,089,938.61
Funding Available for Distribution DY1Q2	$	544,969.30

2.b.iii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	272,485	272,485
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**272,485**	**272,485**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	272,485	272,485
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**15.00**	**15.00**	**100%**	**20%**	**10%**	**272,485**	**272,485**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**544,969**	**544,969**

Total Project 2.b.iii AVs Awarded: 20 out of 20

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Domain 1 Project Milestones - Project 2.b.iii

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
●	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iii

●	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 2.b.iii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
●	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2017	3/31/2020	On Hold	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iii

	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25

	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1

	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total			**15.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iv

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.iv
Project Title	Care transitions intervention patients with a care transition plan developed prior to discharge.

Payment Snapshot		
Payment Available (DY1)	$	2,722,790.65
DY1 Payment Earned to Date	$	1,633,674.39
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	1,089,116.26
Funding Available for Distribution DY1Q2	$	544,558.13

2.b.iv Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	272,279	272,279
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**272,279**	**272,279**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	272,279	272,279
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**15.00**	**15.00**	**100%**	**20%**	**10%**	**272,279**	**272,279**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**544,558**	**544,558**

Total Project 2.b.iv AVs Awarded: 20 out of 20

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Domain 1 Project Milestones - Project 2.b.iv

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iv

	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 2.b.iv						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Ensure required social services participate in the project.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

●	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iv (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25

●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
●	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
●	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.b.iv

●	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
●	Potentially Avoidable Readmissions	Pass & Ongoing	1
●	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
●	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total			**15.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.d.i

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.d.i
Project Title	Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care

Payment Snapshot		
Payment Available (DY1)	$	2,356,103.33
DY1 Payment Earned to Date	$	1,413,662.00
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	942,441.33
Funding Available for Distribution DY1Q2	$	471,220.67

2.d.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	235,610	235,610
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**235,610**	**235,610**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	235,610	235,610
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**4.00**	**4.00**	**100%**	**20%**	**10%**	**235,610**	**235,610**
Total		**Complete**	**9.00**	**9.00**	**100%**	**100%**	**20%**	**471,221**	**471,221**

Total Project 2.d.i AVs Awarded: 9 out of 9

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Domain 1 Project Milestones - Project 2.d.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.d.i

	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 2.d.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A

	7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	9. Measure PAM® components	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.d.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 2.d.i

	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25
	ED use by uninsured	Pass & Ongoing	1
	PAM Level	Pass & Ongoing	1
	Use of primary and preventive care services-- Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1
Total			**4.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.a.i

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.a.i
Project Title	Integration of primary care and behavioral health services

Payment Snapshot		
Payment Available (DY1)	$	2,471,372.43
DY1 Payment Earned to Date	$	1,482,823.46
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	988,548.97
Funding Available for Distribution DY1Q2	$	494,274.49

3.a.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	1/1/1900	80%	10%	247,137	247,137
	Project Implementation Speed	N/A	0.00	0.00	1/0/1900				
	Patient Engagement Speed	Complete	0.00	0.00	1/0/1900				
Domain 1 Subtotal			**5.00**	**5.00**	**1/1/1900**	**80%**	**10%**	**247,137**	**247,137**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	1/1/1900	20%	10%	247,137	247,137
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			**10.00**	**10.00**	**1/1/1900**	**20%**	**10%**	**247,137**	**247,137**
Total		**Complete**	**15.00**	**15.00**	**1/1/1900**	**100%**	**20%**	**494,274**	**494,274**

Total Project 3.a.i AVs Awarded: 15 out of 15

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Domain 1 Project Milestones - Project 3.a.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
🔴	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
🟢	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

●	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0**

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3

☑ 3.a.i Model 1 ☑ 3.a.i Model 2 ☑ 3.a.i Model 3

Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
3.a.i Model 1	●	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	●	2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	●	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

3.a.i Model 2		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 3		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	On Hold	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	On Hold	Pass & Ongoing	N/A
		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2017	3/31/2017	On Hold	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A

		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	On Hold	Pass & Ongoing	N/A
Total							**0**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.a.i

●	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
●	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
●	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
●	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
●	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total			**10**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.a.ii

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.a.ii
Project Title	Behavioral health community crisis stabilization services

Payment Snapshot		
Payment Available (DY1)	$	2,344,635.38
DY1 Payment Earned to Date	$	1,406,781.23
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	937,854.15
Funding Available for Distribution DY1Q2	$	468,927.08

3.a.ii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	234,464	234,464
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**10%**	**234,464**	**234,464**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	234,464	234,464
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**10.00**	**10.00**	**100%**	**20%**	**10%**	**234,464**	**234,464**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**20%**	**468,927**	**468,927**

Total Project 3.a.ii AVs Awarded: 16 out of 16

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Domain 1 Project Milestones - Project 3.a.ii

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
🔴	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
🟢	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 3.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	NA
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA

	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	12/31/2016	In Process	Pass & Ongoing	NA
	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.ii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5

●	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
●	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
●	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
●	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
●	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
●	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
●	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.a.ii

●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
●	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
●	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total			**10.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.b.i

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.b.i
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)

Payment Snapshot		
Payment Available (DY1)	$	1,816,802.42
DY1 Payment Earned to Date	$	1,090,081.45
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	726,720.97
Funding Available for Distribution DY1Q2	$	363,360.48

3.b.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	181,680	181,680
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**181,680**	**181,680**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	20%	10%	181,680	181,680
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**7.00**	**7.00**	**100%**	**20%**	**10%**	**181,680**	**181,680**
Total		**Complete**	**12.00**	**12.00**	**100%**	**100%**	**20%**	**363,360**	**363,360**

Total Project 3.b.i AVs Awarded: 12 out of 12

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Domain 1 Project Milestones - Project 3.b.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
●	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 3.b.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A

	7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2017	3/31/2018	Not Started	Pass & Ongoing	N/A
	9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
	13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2017	3/31/2018	Not Started	Pass & Ongoing	N/A
	14. Develop and implement protocols for home blood pressure monitoring with follow up support.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

	16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2017	3/31/2018	Not Started	Pass & Ongoing	N/A
	18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this	3/31/2017	3/31/2018	Not Started	Pass & Ongoing	N/A
	20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.b.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Aspirin Use	Pass & Ongoing	0.5
	Discussion of Risks and Benefits of Aspirin Use	Pass & Ongoing	0.5
	Controlling High Blood Pressure	Pass & Ongoing	1

	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
	Prevention Quality Indicator # 13 (Angina without procedure) ±	Pass & Ongoing	1
	Prevention Quality Indicator # 7 (HTN) ±	Pass & Ongoing	1
Total			**7.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.g.i

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.g.i
Project Title	Integration of palliative care into the PCMH model

Payment Snapshot		
Payment Available (DY1)	$	1,394,107.52
DY1 Payment Earned to Date	$	836,464.51
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	557,643.01
Funding Available for Distribution DY1Q2	$	278,821.50

3.g.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	139,411	139,411
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**139,411**	**139,411**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	20%	10%	139,411	139,411
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**5.00**	**5.00**	**100%**	**20%**	**10%**	**139,411**	**139,411**
Total		**Complete**	**10.00**	**10.00**	**100%**	**100%**	**20%**	**278,822**	**278,822**

Total Project 3.g.i AVs Awarded: 10 out of 10

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Domain 1 Project Milestones - Project 3.g.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.g.i

	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 3.g.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i (all Milestones are P4R in DY1)

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 3.g.i

AV Driving	Measure	Reviewer Status	AVs Awarded
●	Advanced Directives – Talked about Appointing for Health Decisions	Pass & Ongoing	1
●	Depressive feelings - percentage of members who experienced some depression feeling ±	Pass & Ongoing	1
●	Percentage of members who had severe or more intense daily pain ±	Pass & Ongoing	1
●	Percentage of members who remained stable or demonstrated improvement in pain	Pass & Ongoing	1
●	Percentage of members whose pain was not controlled ±	Pass & Ongoing	1
Total			**5.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 4.a.iii

Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.a.iii
Project Title	Strengthen Mental Health and Substance Abuse Infrastructure Across Systems

Payment Snapshot		
Payment Available (DY1)	$	1,267,370.48
DY1 Payment Earned to Date	$	760,422.29
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	506,948.19
Funding Available for Distribution DY1Q2	$	253,474.10

4.a.iii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	126,737	126,737
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**126,737**	**126,737**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	126,737	126,737
	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			**11.00**	**11.00**	**100%**	**20%**	**10%**	**126,737**	**126,737**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**20%**	**253,474**	**253,474**

Total Project 4.a.iii AVs Awarded: 16 out of 16

Hide Reviewer Comments

Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 4.a.iii

●	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
●	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total			**11.00**

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 4.d.i

Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.d.i
Project Title	Reduce Premature Births

Payment Snapshot		
Payment Available (DY1)	$	1,520,844.57
DY1 Payment Earned to Date	$	912,506.74
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	608,337.83
Funding Available for Distribution DY1Q2	$	304,168.91

4.d.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	152,084	152,084
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**10%**	**152,084**	**152,084**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	27.00	27.00	100%	20%	10%	152,084	152,084
	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			**27.00**	**27.00**	**100%**	**20%**	**10%**	**152,084**	**152,084**
Total		**Complete**	**32.00**	**32.00**	**100%**	**100%**	**20%**	**304,169**	**304,169**

Total Project 4.d.i AVs Awarded: 32 out of 32

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.d.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years	Pass & Ongoing	1
●	Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years – Ratio of Black non-Hispanics to White nonHispanics	Pass & Ongoing	1

●	Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years—Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Maternal mortality rate per 100,000 births	Pass & Ongoing	1
●	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
●	Percentage of children with any kind of health insurance - Aged under 19 years	Pass & Ongoing	1
●	Percentage of infants exclusively breastfed in the hospital	Pass & Ongoing	1

●	Percentage of infants exclusively breastfed in the hospital – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1
●	Percentage of infants exclusively breastfed in the hospital – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of infants exclusively breastfed in the hospital – Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
●	Percentage of live births that occur within 24 months of a previous pregnancy	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of preterm births	Pass & Ongoing	1
●	Percentage of preterm births – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Central New York Care Collaborative, Inc. - Project 4.d.i

●	Percentage of preterm births – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of preterm births – Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
●	Percentage of unintended pregnancy among live births	Pass & Ongoing	1
●	Percentage of unintended pregnancy among live births – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1
●	Percentage of unintended pregnancy among live births—Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of unintended pregnancy among live births—Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
●	Percentage of women with health coverage - Aged 18-64 years	Pass & Ongoing	1
Total			**27.00**