



Print Summary

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Achievement Value (AV) Scorecard
NYU Lutheran Medical Center

	PPS Information					
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015					
PPS	NYU Lutheran Medical Center					
PPS Number	32					

	Achieve	ement Value (AV) Scorecard	Summary					
		AV I	Data			Payme	nt Data		
Project Link (click on the purple link below to access each individual project report)	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	Organizati	•	e embedded w payment	ithin each	
2.a.i	20.00	20.00	0.00	20.00	\$397,926.59	\$397,926.59	\$ -	\$397,926.59	
2.b.iii	21.00	21.00	0.00	21.00	\$283,971.21	\$283,971.21	\$ -	\$283,971.21	
2.b.ix	21.00	21.00	0.00	21.00	\$255,209.03	\$255,209.03	\$ -	\$255,209.03	
2.c.i	21.00	21.00	0.00	21.00	\$267,352.09	\$267,352.09	\$ -	\$267,352.09	
3.a.i	15.00	15.00	0.00	15.00	\$262,502.51	\$262,502.51	\$ -	\$262,502.51	
3.c.i	12.00	12.00	0.00	12.00	\$197,266.11	\$197,266.11	\$ -	\$197,266.11	
3.d.ii	9.00	9.00	0.00	9.00	\$204,227.56	\$204,227.56	\$ -	\$204,227.56	
4.b.i	14.00	14.00	0.00	14.00	\$175,885.08	\$175,885.08	\$ -	\$175,885.08	
4.c.ii	16.00	16.00	0.00	16.00	\$145,337.95	\$145,337.95	\$ -	\$145,337.95	
AV Adjustments (Column F)									
Total	149.00	149.00	0.00	667.00	\$2,189,678	\$2,189,678	\$ -	\$2,189,678	



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

Achievement Value (AV) Scorecard
NYU Lutheran Medical Center



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

NYU Lutheran Medical Center - 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

Hide Reviewer Comments

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

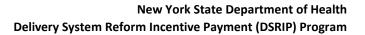


	Prin	t			NIO Lutheran N	nealcai center - Domain 1 Orga	iilizationai Av
		Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	Not Started	Pass & Ongoing	
Additional Workforce Strategy Budget Updates (non AV- driving)		Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	Not Started	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	1
		5. Develop training strategy	N/A	N/A	Not Started	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Workforce Strategy Topic Areas		Key Stakeholders	N/A Page	N/A	In Process	Pass & Ongoing	N/A



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	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
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	In Process	Pass & Ongoing	
		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly Project							1
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	In Process	Pass & Ongoing	
Budget and Flow of							
Funds		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	
			Page	5			





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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Domain 1 Organizational AVs

Total 1

			Section 02 - Go	overnance			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Finalize governance structure and sub- committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Structure Updates		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
							1
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Update							
		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	Not Started	Pass & Ongoing	
		6. Finalize partnership agreements or contracts with CBOs	N/A	3/31/2016	In Process	Pass & Ongoing	
Additional							
Governance Milestones (non AV-		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 Page	3/31/2016	Not Started	Pass & Ongoing	N/A



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		8. Finalize workforce communication and engagement plan	N/A	12/31/2015	Not Started	Pass & Ongoing	
_		9. Inclusion of CBOs in PPS Implementation	N/A	3/31/2016	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk	NI/A	NI/A	In Dun cook	Pass & Ongoing	
		Mitigation Strategies	N/A	N/A	In Process	Pass & Oligoling	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Governance - Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
-		IT Superheticus	NI/A	NI/A	In Dun cons	Dans & 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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		Sec	tion 03 - Financi	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awa
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Financial Stability		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	Not Started	Pass & Ongoing	
Update							
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Not Started	Pass & Ongoing	1
PPS Transition		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	
to Value							
Based Payment System		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	
		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	
Additional							



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PPS Transition to Value Based		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
Payment _ System		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	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial Stability Fopic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		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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		Section 04	- Cultural Compe	tency & Health I	iteracy		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Cultural							
Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of languageappropriate material).	6/30/2016	6/30/2016	Not Started	Pass & Ongoing	1
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Cultural Competency							NI/A
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Topic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

NYU Lutheran Medical Center - Domain 1 Organizational AVs

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	
		Develop an IT Change Management Strategy.	N/A	6/30/2016	In Process	Pass & Ongoing	
		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	Not Started	Pass & Ongoing	
		5. Develop a data security and confidentiality plan.	N/A	6/30/2016	Not Started	Pass & Ongoing	
		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 NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

Total

	Section 06 - Performance Reporting						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performanc - e Reporting		Establish reporting structure for PPS-wide performance reporting and communication.	N/A	3/31/2016	Not Started	Pass & Ongoing	N/A
		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	6/30/2016	Not Started	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
			Page 1	12			

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Progress Reporting

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

NYU Lutheran Medical Center - Domain 1 Organizational AVs

		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc e Reporting Topic Areas		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
			-	-			N/
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN,
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

N/A

N/A

Total 0

In Process

		Sec	tion 07 - Practitio	ner Engagement	t		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	N/A	6/30/2016	Not Started	Pass & Ongoing	
Practitioner Engagement		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	N/A
			Page :	13			



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		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner							N/A
Engagement Topic Areas		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	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving	Willestone	Date Date	Status	neviewer status	AVAWaraca	
		Develop population health management roadmap.	N/A	9/30/2016	Not Started	Pass & Ongoing	N/A
Population							N/A
Health		2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	Not Started	Pass & Ongoing	NI/A



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							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional Population		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Health Topic Areas		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
		Perform a clinical integration 'needs assessment'.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
Clinical							IN/A



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			Total				0
_		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
							N/A
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							
_		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
							IN/A
Integration		2. Develop a Clinical Integration strategy.	N/A	12/31/2016	Not Started	Pass & Ongoing	N/A
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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 2.a.i

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

Payment Snapshot					
Payment Available (DY1)	\$	1,989,632.97			
DY1 Payment Earned to Date	\$	1,193,779.78			
DY1 Payment Not Earned to Date	\$	-			
DY1 Funding Remaining	\$	795,853.19			
Funding Available for Distribution DY1Q2	\$	397,926.59			

	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 Organizational	Complete	5.00	5.00	100%			198,963	198,963
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%		
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	198,963	198,963
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	198,963	198,963
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal			15.00	100%	20%	10%	198,963	198,963
	Total	Complete	20.00	20.00	100%	100%	20%	397,927	397,927

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			
Total						0.00			
	Page 1	7							



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Project Requirement and Metric/Deliverable	Required	Committed	Milestone		
idens must be included in the lateracted Delivery Contains	Due Date	Due Date	Status	Reviewer Status	AVs Awarded
iders must be included in the Integrated Delivery System. include all medical, behavioral, post-acute, long-term munity-based service providers within the PPS network; he IDS structure must include payers and social service as necessary to support its strategy.	9/30/2018	9/30/2018	Not Started	Pass & Ongoing	N/A
nering HH and ACO population health management apabilities to implement the PPS' strategy towards n IDS.	9/30/2018	3/31/2017	In Process	Pass & Ongoing	N/A
ents receive appropriate health care and community ling medical and behavioral health, post-acute care, long public health services.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
all PPS safety net providers are actively sharing EHR ocal health information exchange/RHIO/SHIN-NY and information among clinical partners, including directed are messaging), alerts and patient record look up, by the stration Year (DY) 3.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
EHR systems used by participating safety net providers ful Use and PCMH Level 3 standards and/or APCM by the stration Year 3.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
pulation health management by actively using EHRs and rms, including use of targeted patient registries, for all afety net providers.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
oulation h	ealth management by actively using EHRs and ding use of targeted patient registries, for all	ealth management by actively using EHRs and ding use of targeted patient registries, for all 9/30/2018	ealth management by actively using EHRs and ding use of targeted patient registries, for all 9/30/2018 3/31/2017	ealth management by actively using EHRs and ding use of targeted patient registries, for all 9/30/2018 3/31/2017 Not Started	ealth management by actively using EHRs and ding use of targeted patient registries, for all 9/30/2018 3/31/2017 Not Started Pass & Ongoing



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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.	9/30/2018	3/31/2018	Not Started	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.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A	
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A	
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10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	9/30/2018	3/31/2018	Not Started	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	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A	
Total						

	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					



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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 ± Page 20	Pass & Ongoing	1



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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
Page 21		



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

Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - Septemb NYU Lutheran Medical Center - F				
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 NYU Lutheran Medical Center - 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)	\$	1,419,856.07			
DY1 Payment Earned to Date	\$	851,913.64			
DY1 Payment Not Earned to Date	\$	-			
DY1 Funding Remaining	\$	567,942.43			
Funding Available for Distribution DY1Q2	\$	283,971.21			

	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 Organizational	Complete	5.00	5.00	100%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	141,986	141,986	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	141,986	141,986	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	141,986	141,986	
Domain 2	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%	141,986	141,986	
	Total	Complete	21.00	21.00	100%	100%	20%	283,971	283,971	

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

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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				



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 2.b.iii

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

	Domain 1 Project Prescribed N	/lilestones - F	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	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	 Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. Develop process and procedures to establish connectivity between the emergency department and community primary care providers. 	3/31/2018	3/31/2018	Not Started	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 	3/31/2018	3/31/2018	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.)	3/31/2018 4	3/31/2020	On Hold	Pass & Ongoing	N/A



Print			NYU Li	ıtheran Medical Center - P	Project 2.b.iii	
5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A	
Total						

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iii (all Milestones are P4I	R 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 Page 25	Pass & Ongoing	0.25



Print	J Lutheran Medical Center - F	Project 2.b.iii
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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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 NYU Lutheran Medical Center - Project 2.b.ix

	Project Snapshot
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.ix
Project Title	Implementation of observational programs in hospitals

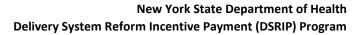
Payment Snapshot							
Payment Available (DY1)	\$	1,276,045.15					
DY1 Payment Earned to Date	\$	765,627.09					
DY1 Payment Not Earned to Date	\$	-					
DY1 Funding Remaining	\$	510,418.06					
Funding Available for Distribution DY1Q2	\$	255,209.03					

	2.b.ix 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 Organizational	Complete	5.00	5.00	100%	80%												
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	127,605	127,605									
	Patient Engagement Speed	Complete	1.00	1.00	100%													
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	127,605	127,605									
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	127,605	127,605									
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-									
	Domain 2 Subtotal			15.00	100%	20%	10%	127,605	127,605									
	Total Complete			21.00	100%	100%	20%	255,209	255,209									

Total Project 2.b.ix AVs Awarded: 21 out of 21

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	Domain 1 Project Milestones - Project 2.b.ix								
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			





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

	Domain 1 Project Prescribed I						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A	
	2. Create clinical and financial model to support the need for the unit.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A	
	3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.	9/30/2017	3/31/2017	Not Started	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 Direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	9/30/2017	3/31/2018	Not Started	Pass & Ongoing	N/A	
	Use EHRs and other technical platforms to track all patients engaged	I					
	in the project.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A	
	Total						

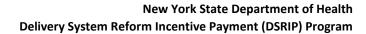


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	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.ix (all Milestones are P4F	R in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access 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) Page 30	Pass & Ongoing	0.5



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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





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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 NYU Lutheran Medical Center - Project 2.c.i

Project Snapshot				
Project Domain	System Transformation Projects (Domain 2)			
Project ID	2.c.i			
Project Title	To develop a community based health navigation service to assist patients to access healthcare services efficiently			

Payment Snapshot					
Payment Available (DY1)	\$	1,336,760.47			
DY1 Payment Earned to Date	\$	802,056.28			
DY1 Payment Not Earned to Date	\$	-			
DY1 Funding Remaining	\$	534,704.19			
Funding Available for Distribution DY1Q2	\$	267,352.09			

	2.c.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 Organizational	Complete	5.00	5.00	100%	80%										
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	133,676	133,676							
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	133,676	133,676							
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	133,676	133,676							
Domain 2	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%	133,676	133,676							
	Total	Complete	21.00	21.00	100%	100%	20%	267,352	267,352							

Total Project 2.c.i AVs Awarded: 21 out of 21

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.c.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		



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

	Domain 1 Project Prescribed	Milestones -	Project 2.c.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.	9/30/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	4. Resource appropriately for the community navigators, evaluating placement and service type.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
	5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
	6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A



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	7. Market the availability of community-based navigation services.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	8. Use EHRs and other technical platforms to track all patients engaged	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	in the project.					
Total					0.00	

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.c.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 19 years	Pass & Ongoing	0.25			
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25			
	Page 35					



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	Time		
	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



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 2.c.i

ly Avoidable Emergency Room Visits ly Avoidable Readmissions	Pass & Ongoing Pass & Ongoing	1
ly Avoidable Readmissions	Pass & Ongoing	1
ly Avoidable Readmissions	Pass & Ongoing	1
Composite of all measures +/-	Pass & Ongoing	1
Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Care - Length of Relationship - Q3 Care - Usual Source of Care - Q2	Care - Length of Relationship - Q3 Pass & Ongoing



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - 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)	\$	1,312,512.53				
DY1 Payment Earned to Date	\$	787,507.52				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	525,005.01				
Funding Available for Distribution DY1Q2	\$	262,502.51				

	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 Organizational	Complete	5.00	5.00	100%	80%	80%	80%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				10%	131,251	131,251						
	Patient Engagement Speed	Complete 0.00 0.00 0%															
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	131,251	131,251								
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	131,251	131,251								
Domain 5	Domain 3 Pay for Performance N/A		N/A	N/A	N/A	0%	0%	-	-								
	Domain 3 Subtotal			10.00	100%	20%	10%	131,251	131,251								
	Total	Complete	15.00	15.00	100%	100%	20%	262,503	262,503								

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

	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		



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.a.i

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

		Domain 1 Project Prescribed Milestone	es - 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
		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.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
3.a.i Model 1							
		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.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.a.i

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		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
3.a.i Model 2		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	3/31/2020	On Hold	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2018	Not Started	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.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
		Page 4	10				



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.a.i

	Print NYU Lutheran Medical Center - Project							
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A	
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	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	Meas ure	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					
	Page 41							



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.a.i

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



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.c.i

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

Payment Snapshot						
Payment Available (DY1)	\$	986,330.56				
DY1 Payment Earned to Date		591798.3356				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	394,532.22				
Funding Available for Distribution DY1Q2	\$	197,266.11				

	3.c.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 Organizational	Complete	5.00	5.00	100%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	98,633	98,633	
	Patient Engagement Speed	#REF!	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	98,633	98,633	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	20%	10%	98,633	98,633	
Domain 3	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 2 Subtotal			6.00	100%	20%	10%	98,633	98,633	
	Total	#REF!	12.00	12.00	100%	100%	20%	197,266	197,266	

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

	Domain 1 Project Milestones - Project 3.c.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			



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.c.i

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

	Domain 1 Project Prescribed Milestones -	Project 3.c.i			
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Not Started	Pass & Ongoing	N/A
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to	3/31/2017	In Process	Pass & Ongoing	N/A
	improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	III Process	rass & Oligoling	IN/A
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Not Started	Pass & Ongoing	N/A
	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Not Started	Pass & Ongoing	N/A
	6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	In Process	Pass & Ongoing	N/A
	7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.44	3/31/2018	Not Started	Pass & Ongoing	N/A



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.c.i

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Total 0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.c.i (all Milestones are P4R	in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	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 # 1 (DM Short term complication) ± Page 45	Pass & Ongoing	1



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

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	Total	6.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.d.ii

Project Snapshot						
Project Domain Clinical Improvement Projects (Domain 3)						
Project ID 3.d.ii						
Project Title	Expansion of asthma home-based self- management program					

Payment Snapshot						
Payment Available (DY1)	\$	1,021,137.79				
DY1 Payment Earned to Date	\$	612,682.68				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	408,455.12				
Funding Available for Distribution DY1Q2	\$	204,227.56				

	3.d.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 Organizational	Complete	5.00	5.00	100%	80%		102,114	102,114
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%		
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	102,114	102,114
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	102,114	102,114
Domain 3	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal			4.00	100%	20%	10%	102,114	102,114
	Total	Complete	9.00	9.00	100%	100%	20%	204,228	204,228

Total Project 3.d.ii AVs Awarded: 9 out of 9

	Domain 1 Project Milestones - Project 3.d.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			



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.d.ii

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

	····cstorics i	Project 3.d.ii			
Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Develop and implement evidence-based asthma management guidelines.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
5. Ensure coordinated care for asthma patients includes social services					
and support.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
1 6 1 6 1 i i i i i i i i i i i i i i i	1. Expand asthma home-based self-management program to include nome environmental trigger reduction, self-monitoring, medication use, and medical follow-up. 2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. 5. Epecifically, change the patient's indoor environment to reduce 3. Develop and implement evidence-based asthma management guidelines. 4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, dentification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. 5. Ensure coordinated care for asthma patients includes social services	1. Expand asthma home-based self-management program to include nome environmental trigger reduction, self-monitoring, medication use, and medical follow-up. 2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. 3/31/2018 3/31/2018 3. Develop and implement evidence-based asthma management guidelines. 3/31/2018 4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, dentification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. 5. Ensure coordinated care for asthma patients includes social services 3/31/2018	1. Expand asthma home-based self-management program to include nome environmental trigger reduction, self-monitoring, medication use, and medical follow-up. 2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce 3. Develop and implement evidence-based asthma management guidelines. 3. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, dentification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. 3. Ensure coordinated care for asthma patients includes social services 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018] 3. [31/2018]	1. Expand asthma home-based self-management program to include nome environmental trigger reduction, self-monitoring, medication use, and medical follow-up. 2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. 3/31/2018 3/31/2018 3/31/2017 In Process 3/31/2018 3/31/2017 In Process 3/31/2018 3/31/2017 In Process 4. Implement training and asthma self-management education services, dentification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. 5. Ensure coordinated care for asthma patients includes social services 3/31/2018 3/31/2018 3/31/2018 3/31/2018 3/31/2018 3/31/2018 Not Started	1. Expand asthma home-based self-management program to include nome environmental trigger reduction, self-monitoring, medication use, and medical follow-up. 2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce 3. Develop and implement evidence-based asthma management guidelines. 3. Develop and implement evidence-based asthma management guidelines. 3. Implement training and asthma self-management education services, ncluding basic facts about asthma, proper medication use, dentification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. 3. Ensure coordinated care for asthma patients includes social services and a start and patients includes social services and patients start and patients includes social services and patients start and patients start and patients includes social services and patients start and patients start and patients includes social services and patients start and patien



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 3.d.ii

6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A		
7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A		
8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A		
Total 0.00							

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.ii (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1				
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5				
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5				
	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1				
	Prevention Quality Indicator # 15 Younger Adult Asthma ± Page 49	Pass & Ongoing	1				



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

Save & Return	Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 20 NYU Lutheran Medical Center - Project 3.	
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	Total 4.00	



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 4.b.i

	Project Snapshot					
Project Domain	Domain 4: Population-wide Projects: New York's					
Project ID	4.b.i					
	Promote Tobacco Use Cessation, especially among					
Project Title	low SES populations and those with poor mental					
	health					

Payment Snapshot				
Payment Available (DY1)	\$	879,425.38		
DY1 Payment Earned to Date	\$	527,655.23		
DY1 Payment Not Earned to Date	\$	-		
DY1 Funding Remaining	\$	351,770.15		
Funding Available for Distribution DY1Q2	\$	175,885.08		

	4.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 Organizational	Complete	5.00	5.00	100%	80%	10%	87,943	87,943
Domain 1	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%	87,943	87,943
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	20%	10%	87,943	87,943
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			9.00	100%	20%	10%	87,943	87,943
Total Complete			14.00	14.00	100%	100%	20%	175,885	175,885

Total Project 4.b.i AVs Awarded: 14 out of 14

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (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				
	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1				



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 4.b.i

Percentage of cigarette smoking among adults	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 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
Total		9.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 4.c.ii

Project Snapshot					
Project Domain	Domain 4: Population-wide Projects: New York's				
Project ID	4.c.ii				
Project Title	Increase early access to, and retention in, HIV care				

Payment Snapshot				
Payment Available (DY1)	\$	726,689.75		
DY1 Payment Earned to Date	\$	436,013.85		
DY1 Payment Not Earned to Date	\$	-		
DY1 Funding Remaining	\$	290,675.90		
Funding Available for Distribution DY1Q2	\$	145,337.95		

4.c.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%	72,669	72,669
	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%	72,669	72,669
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	72,669	72,669
	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%	72,669	72,669
Total Complete		16.00	16.00	100%	100%	20%	145,338	145,338	

Total Project 4.c.ii AVs Awarded: 16 out of 16

Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (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					
	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1					



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 NYU Lutheran Medical Center - Project 4.c.ii

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Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
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 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
TotalPage 54		11.00