



Print Summary

Print All

| PPS Information | |
|-----------------|---|
| Quarter | DY1, Q3 October 1, 2015 - December 31, 2015 |
| PPS | NYU Lutheran Medical Center |
| PPS Number | 32 |

| 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 | <i>Organizational funds are embedded within each project's payment</i> | | | |
| 2.a.i | 20.00 | 20.00 | 0.00 | 20.00 | \$ - | \$ - | \$ - | \$ - |
| 2.b.iii | 21.00 | 21.00 | 0.00 | 21.00 | \$ - | \$ - | \$ - | \$ - |
| 2.b.ix | 21.00 | 21.00 | 0.00 | 21.00 | \$ - | \$ - | \$ - | \$ - |
| 2.c.i | 21.00 | 21.00 | 0.00 | 21.00 | \$ - | \$ - | \$ - | \$ - |
| 3.a.i | 15.00 | 15.00 | 0.00 | 15.00 | \$ - | \$ - | \$ - | \$ - |
| 3.c.i | 12.00 | 12.00 | 0.00 | 12.00 | \$ - | \$ - | \$ - | \$ - |
| 3.d.ii | 9.00 | 9.00 | 0.00 | 9.00 | \$ - | \$ - | \$ - | \$ - |
| 4.b.i | 14.00 | 14.00 | 0.00 | 14.00 | \$ - | \$ - | \$ - | \$ - |
| 4.c.ii | 16.00 | 16.00 | 0.00 | 16.00 | \$ - | \$ - | \$ - | \$ - |
| AV Adjustments (Column F) | | | | | | | | |
| Total | 149.00 | 149.00 | 0.00 | 149.00 | \$ - | \$ - | \$ - | \$ - |



**Department
of Health**

Medicaid
Redesign Team

Print Summary

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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, Q3 October 1, 2015 - December 31, 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 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 | 6/30/2016 | In Process | Pass & Ongoing | |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Domain 1 Organizational AVs

| | | | | | | | |
|---|--|---|-----|-----------|-------------|----------------|-----|
| Additional Workforce Strategy Budget Updates (non AV-driving) | | | | | | | 1 |
| | | 2. Create a workforce transition roadmap for achieving defined target workforce | N/A | 9/30/2016 | Not Started | Pass & Ongoing | |
| | | 3. Perform detailed gap analysis between current state assessment of workforce and projected future state | N/A | 6/30/2016 | 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 | 6/30/2016 | In Process | Pass & Ongoing | |
| | | 5. Develop training strategy | N/A | 9/30/2016 | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | 3/31/2016 | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | Completed | Pass & Complete | |
| | ● | 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 | Completed | Pass & Complete | |
| 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 | Not Started | 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 | 12/31/2016 | Not Started | Pass & Ongoing | |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Domain 1 Organizational AVs

| | | | | | | | |
|-----------------------------------|---|--|-----|-----------|-------------|----------------|----------|
| Living) | | | | | | | |
| | ● | 8. Finalize workforce communication and engagement plan | N/A | 3/31/2016 | Not Started | Pass & Ongoing | |
| | | | | | | | |
| | ● | 9. Inclusion of CBOs in PPS Implementation | N/A | 3/31/2016 | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | Completed | Pass & Complete | 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 | Completed | Pass & Complete | |
| 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 | 9/30/2016 | 9/30/2016 | 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 | 3/31/2017 | In Process | Pass & Ongoing | |
| Additional | ● | 6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation | 3/31/2018 | 3/31/2018 | On Hold | Pass & Ongoing | |



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NYU Lutheran Medical Center - 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 | 3/31/2019 | 3/31/2019 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| PPS Transition to Value Based 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 | 3/31/2020 | 3/31/2020 | On Hold | Pass & Ongoing | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | Completed | Pass & Complete | 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 | Not Started | 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 | |



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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 | 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 | 9/30/2016 | 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. | 6/30/2016 | 6/30/2016 | In Process | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | 6/30/2016 | Not Started | Pass & Ongoing | N/A |
| | | | | | | | |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |



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NYU Lutheran Medical Center - 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 practitioners 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | 9/30/2016 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| | ● | 2. Finalize PPS-wide bed reduction plan. | N/A | 3/31/2017 | In Process | Pass & Ongoing | N/A |



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NYU Lutheran Medical Center - Domain 1 Organizational AVs

| | | | | | | | | |
|--|---|--|-----|-----|------------|----------------|----------|--|
| | | | | | | | 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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Domain 1 Organizational AVs

| | | | | | | | |
|---|--------------------|--|-----|------------|----------------|----------------|----------|
| Integration | ● | 2. Develop a Clinical Integration strategy. | N/A | 12/31/2016 | Not Started | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center AV Adjustments

| AV Adjustment Scoresheet | | | | | | | | |
|--|-----------------|-------------------------|---------------------|-------------------|---------------|--------------|-----------------|---------------|
| Adjustment | AVs Per Project | Total Projects Selected | Total AVs Available | Total AVs Awarded | | Adjusted AVs | Net AVs Awarded | |
| | | | | Net Awarded | Percentage AV | | Net Awarded | Percentage AV |
| Organizational Adjustments (applied to all projects) | 5.00 | 9.00 | 45.00 | 45.00 | 100% | 0.00 | 45.00 | 100% |
| Project Adjustments (applied to one project only) | Various | 9.00 | 104.00 | 104.00 | 100% | 0.00 | 104.00 | 100% |
| Total | | | 149.00 | 149.00 | 100% | 0.00 | 149.00 | 100% |

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for NYU Lutheran Medical Center in DY1, Q3



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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) | \$ 1,989,632.97 |
| DY1 Initial Payment | \$ 1,193,779.78 |
| DY1 Q2 Payment Earned | \$ 397,926.59 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 397,926.59 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.a.i Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|-----------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | Complete | 20.00 | 20.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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 |
| | | | | | Pass & Ongoing | |
| Total | | | | | | 0.00 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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. | 9/30/2018 | 9/30/2018 | 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. | 9/30/2018 | 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. | 9/30/2018 | 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3. | 9/30/2018 | 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. | 9/30/2018 | 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. | 9/30/2018 | 3/31/2017 | In Process | Pass & Ongoing | N/A |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.a.i

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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 | 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. | 9/30/2018 | 9/30/2018 | 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 | In Process | Pass & Ongoing | N/A |
| ● | 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes. | 9/30/2018 | 9/30/2018 | 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 | 9/30/2018 | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.a.i

| | | | |
|---|--|----------------|-----------|
| ● | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 NYU Lutheran Medical Center - Project 2.a.i

| | | | |
|---|---|----------------|-----|
| | | | |
| ● | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.a.i*

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



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 851,913.64 |
| DY1 Q2 Payment Earned | \$ 283,971.21 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 283,971.21 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.b.iii Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | | 21.00 | 21.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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 |
| | | | | Please Select | | |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.iii

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

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 | 3/31/2018 | 3/31/2018 | 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 | 3/31/2018 | 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 | 3/31/2020 | On Hold | Pass & Ongoing | N/A |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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 | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.iii

| | | | |
|--------------|--|----------------|--------------|
| | | | |
| ● | 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, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 765,627.09 |
| DY1 Q2 Payment Earned | \$ 255,209.03 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 255,209.03 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.b.ix Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | | 21.00 | 21.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.ix

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

Domain 1 Project Prescribed Milestones - Project 2.b.ix

| 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 | In Process | 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. | 3/31/2018 | 3/31/2018 | Not Started | Pass & Ongoing | N/A |
| ● | 5. Use EHRs and other technical platforms to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Not Started | Pass & Ongoing | N/A |
| Total | | | | | | 0.00 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.ix

| Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.ix (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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.ix

| | | | |
|---|---|----------------|-----|
| | | | |
| | | | |
| ● | 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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.b.ix

| | | | |
|--------------|--|----------------|--------------|
| | | | |
| ● | 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, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 802,056.28 |
| DY1 Q2 Payment Earned | \$ 267,352.09 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 267,352.09 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.c.i Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | | 21.00 | 21.00 | 100% | 100% | 0% | - | - |

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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.c.i

| | | | | | | |
|--------------|-------------------------------------|---------|-----|------------|----------------|-------------|
| ● | 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. | 3/31/2017 | 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. | 3/31/2017 | 3/31/2017 | In Process | 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 | 9/30/2017 | Not Started | Pass & Ongoing | N/A |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.c.i

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



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 2.c.i

| | | | |
|---|---|----------------|------|
| ● | 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, Q3 October 1, 2015 - December 31, 2015

NYU Lutheran Medical Center - Project 2.c.i

| | | | |
|--------------|--|----------------|--------------|
| ● | 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, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 787,507.52 |
| DY1 Q2 Payment Earned | \$ 262,502.51 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 262,502.51 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 3.a.i Scoresheet | | | | | | | | | |
|--------------------------|----------------------------------|-----------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 10.00 | 10.00 | 100% | 20% | 0% | - | - |
| | Domain 3 Pay for Performance | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| Domain 3 Subtotal | | | 10.00 | 10.00 | 100% | 20% | 0% | - | - |
| Total | | Complete | 15.00 | 15.00 | 100% | 100% | 0% | - | - |

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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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 3.a.i

| | | | | | | |
|--------------|-------------------------------------|---------|-----|-------------|----------------|----------|
| ● | 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 | Not Started | 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. | 3/31/2018 | 3/31/2017 | In Process | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

NYU Lutheran Medical Center - Project 3.a.i

| | | | | | | | |
|---------------|---|--|-----------|-----------|-------------|----------------|-----|
| 3.a.i Model 2 | ● | 6. Develop collaborative evidence-based standards of care including medication management and care engagement process. | 3/31/2020 | 3/31/2020 | On Hold | 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. | 3/31/2020 | 3/31/2020 | On Hold | Pass & Ongoing | N/A |
| | ● | 8. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2020 | 3/31/2020 | On Hold | Pass & Ongoing | N/A |
| 3.a.i Model 3 | ● | 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. | 3/31/2017 | 3/31/2017 | Not Started | Pass & Ongoing | N/A |
| | ● | 11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model. | 3/31/2017 | 3/31/2017 | Not Started | Pass & Ongoing | N/A |
| | ● | 12. Designate a Psychiatrist meeting requirements of the IMPACT Model. | 3/31/2017 | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

NYU Lutheran Medical Center - Project 3.a.i

| | | | | | | |
|--------------|--|-----------|-----------|-------------|----------------|----------|
| ● | 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. | 3/31/2017 | 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 | 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - 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, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 3.c.i

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

| Payment Snapshot | |
|--|---------------|
| Payment Available (DY1) | \$ 986,330.56 |
| DY1 Initial Payment | \$ 591,798.34 |
| DY1 Q2 Payment Earned | 197266.1119 |
| DY1 Payment Not Earned to Date | \$ - |
| DY1 Funding Remaining | \$ 197,266.11 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 3.c.i Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|-----------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 6.00 | 6.00 | 100% | 20% | 0% | - | - |
| | Domain 3 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| Domain 2 Subtotal | | | 6.00 | 6.00 | 100% | 20% | 0% | - | - |
| Total | | Complete | 12.00 | 12.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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 |
| ● | | | | | | |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 3.c.i

| | | | | | | |
|--------------|-------------------------------------|---------|-----|------------|----------------|-------------|
| ● | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 |
| 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 improve health literacy, patient self-efficacy, and patient self-management. | 3/31/2017 | In Process | Pass & Ongoing | N/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. | 3/31/2018 | Not Started | Pass & Ongoing | N/A |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

NYU Lutheran Medical Center - Project 3.c.i

| | | |
|-------|--|------|
| 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 46 | Pass & Ongoing | 1 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

NYU Lutheran Medical Center - Project 3.c.i

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| | |
| Total | 6.00 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 612,682.68 |
| DY1 Q2 Payment Earned | \$ 204,227.56 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 204,227.56 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 3.d.ii Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 4.00 | 4.00 | 100% | 20% | 0% | - | - |
| | Domain 3 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| Domain 2 Subtotal | | | 4.00 | 4.00 | 100% | 20% | 0% | - | - |
| Total | | | 9.00 | 9.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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 |
| ● | | | | | | |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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 |

Domain 1 Project Prescribed Milestones - Project 3.d.ii

| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|---|-------------------|--------------------|------------------|-----------------|-------------|
| ● | 1. 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 |
| ● | 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 | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 3. Develop and implement evidence-based asthma management guidelines. | 3/31/2017 | 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. | 3/31/2017 | 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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. | 3/31/2017 | 3/31/2017 | In Process | 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. | 3/31/2017 | 3/31/2017 | Completed | 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 ± | Pass & Ongoing | 1 |



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*Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
NYU Lutheran Medical Center - Project 3.d.ii*

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|--------------|-------------|
| | |
| Total | 4.00 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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 |
| Project Title | Promote Tobacco Use Cessation, especially among low SES populations and those with poor mental health |

| Payment Snapshot | |
|--|---------------|
| Payment Available (DY1) | \$ 879,425.38 |
| DY1 Initial Payment | \$ 527,655.23 |
| DY1 Q2 Payment Earned | \$ 175,885.08 |
| DY1 Payment Not Earned to Date | \$ - |
| DY1 Funding Remaining | \$ 175,885.08 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 4.b.i Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 4 | Domain 4 Pay for Reporting (P4R) | Complete | 9.00 | 9.00 | 100% | 20% | 0% | - | - |
| | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| Domain 4 Subtotal | | | 9.00 | 9.00 | 100% | 20% | 0% | - | - |
| Total | | | 14.00 | 14.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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, Q3 October 1, 2015 - December 31, 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 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 Initial Payment | \$ 436,013.85 |
| DY1 Q2 Payment Earned | \$ 145,337.95 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 145,337.95 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 4.c.ii Scoresheet | | | | | | | | | |
|--------------------------|------------------------------------|---------------|---------------|-----------------|---------------|------------------------|----------------------------|------------------------|-------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY1) | Domain Funding % (DY1, Q3) | Payment Available (\$) | Net Payment Earned (\$) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 80% | 0% | - | - |
| | 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% | 0% | - | - |
| Domain 4 | Domain 4 Pay for Reporting (P4R) | Complete | 11.00 | 11.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | | 16.00 | 16.00 | 100% | 100% | 0% | - | - |

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

Hide Reviewer Comments

| 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 |



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 NYU Lutheran Medical Center - Project 4.c.ii

| | | | |
|--------------|--|----------------|--------------|
| ● | 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 |
| Total | | | 11.00 |