NEW YORK STATE Department of Health | Medicaid Redesign Team

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Achievement Value (AV) Scorecard
Samaritan Medical Center

PPS Information	
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015
PPS	Samaritan Medical Center
PPS Number	45

Achievement Value (AV) Scorecard Summary								
	AV Data				**Payment 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	*Organizational funds are embedded within each project's payment*			
2.a.i	20.00	20.00	0.00	20.00	$333,848.98	$333,848.98	$ -	$333,848.98
2.a.ii	21.00	21.00	0.00	21.00	$226,719.32	$226,719.32	$ -	$226,719.32
2.a.iv	20.00	20.00	0.00	20.00	$344,530.82	$344,530.82	$ -	$344,530.82
2.b.iv	21.00	21.00	0.00	21.00	$253,039.50	$253,039.50	$ -	$253,039.50
2.d.i	9.00	9.00	0.00	9.00	$219,230.60	$219,230.60	$ -	$219,230.60
3.a.i	15.00	15.00	0.00	15.00	$225,156.12	$225,156.12	$ -	$225,156.12
3.b.i	12.00	12.00	0.00	12.00	$166,029.82	$166,029.82	$ -	$166,029.82
3.c.i	12.00	12.00	0.00	12.00	$167,284.41	$167,284.41	$ -	$167,284.41
3.c.ii	11.00	11.00	0.00	11.00	$165,885.21	$165,885.21	$ -	$165,885.21
4.a.iii	16.00	16.00	0.00	16.00	$127,604.01	$127,604.01	$ -	$127,604.01
4.b.ii	21.00	21.00	0.00	21.00	$108,463.41	$108,463.41	$ -	$108,463.41

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Achievement Value (AV) Scorecard
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AV Adjustments (Column F)

Total	178.00	178.00	0.00	667.00	$2,337,792	$2,337,792	$ -	$2,337,792

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Domain I Organizational Scoresheet

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

Net Organizational AVs Awarded: 5 out of 5

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Workforce Strategy

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Workforce Strategy Budget Updates	🟢	Workforce Strategy Budget Updates	3/31/2016				
	🟢	Workforce Impact Analysis and Updates	6/30/2016				
	🟢	New Hire Employment Analysis and Updates	6/30/2016				
	🔴	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	

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

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			Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 01 - Budget							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Quarterly Project Reports, Project Budget and Flow of Funds	🟢	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1
	🟢	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
	🟢	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
	🟢	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
	🟢	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	

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Total							1

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

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(driving)							
	●	8. Finalize workforce communication and engagement plan	N/A	6/30/2016	In Process	Pass & Ongoing	
	●	9. Inclusion of CBOs in PPS Implementation	N/A	6/30/2016	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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	Section 03 - Financial Sustainability						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	In Process	Pass & Ongoing	1
	●	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	●	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
PPS Transition to Value Based Payment System	●	4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	●	5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
Additional	●	6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	TBD	N/A	N/A	N/A	

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

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

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	🔴						
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	3/31/2016	In Process	Pass & Ongoing	
	🔴	4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	In Process	Pass & Ongoing	
	🔴	5. Develop a data security and confidentiality plan.	N/A	3/31/2016	In Process	Pass & Ongoing	
		This milestone is Pass and Ongoing pending final review of security workbooks by DOH					
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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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	9/30/2016	In Process	Pass & Ongoing	N/A
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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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	12/31/2015	In Process	Pass & Ongoing	N/A
	🔴	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	N/A	12/31/2015	In Process	Pass & Ongoing	

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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	6/30/2016	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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Process Measure	AV Driving	Milestone			Milestone Status	Reviewer Status	AV Awarded
	🔴						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	12/31/2015	In Process	Pass & Ongoing	N/A

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Integration		2. Develop a Clinical Integration strategy.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

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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)	$	1,669,244.89
DY1 Payment Earned to Date	$	1,001,546.93
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	667,697.96
Funding Available for Distribution DY1Q2	$	333,848.98

2.a.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	166,924	166,924
	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%**	**166,924**	**166,924**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	166,924	166,924
	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%**	**166,924**	**166,924**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**333,849**	**333,849**

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

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

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

Domain 1 Project Prescribed Milestones - 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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	In Process	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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🟢	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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	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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●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total			**15.00**

Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan Medical Center - Project 2.a.ii

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.ii
Project Title	Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the New York State Health Innovation Plan (SHIP))

Payment Snapshot		
Payment Available (DY1)	$	1,133,596.60
DY1 Payment Earned to Date	$	680,157.96
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	453,438.64
Funding Available for Distribution DY1Q2	$	226,719.32

2.a.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	113,360	113,360
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**10%**	**113,360**	**113,360**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	113,360	113,360
	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%**	**113,360**	**113,360**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**20%**	**226,719**	**226,719**

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

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

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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.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Identify a physician champion with knowledge of PCMH/APCM implementation for each primary care practice included in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Ensure 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	In Process	Pass & Ongoing	N/A
🟢	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan Medical Center - Project 2.a.ii

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🟢	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	9. Implement open access scheduling in all primary care practices.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.ii (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

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

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

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan Medical Center - Project 2.a.ii

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

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iv
Project Title	Create a medical village using existing hospital infrastructure

Payment Snapshot		
Payment Available (DY1)	$	1,722,654.10
DY1 Payment Earned to Date	$	1,033,592.46
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	689,061.64
Funding Available for Distribution DY1Q2	$	344,530.82

2.a.iv Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	172,265	172,265
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**80%**	**10%**	**172,265**	**172,265**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	172,265	172,265
	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%**	**172,265**	**172,265**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**344,531**	**344,531**

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

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

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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan Medical Center - Project 2.a.iv

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

Total	**0.00**

Domain 1 Project Prescribed Milestones - Project 2.a.iv						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Convert outdated or unneeded hospital capacity into an outpatient services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Provide a detailed timeline documenting the specifics of bed reduction and rationale. Specified bed reduction proposed in the project must include active or "staffed" beds.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Ensure that all participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	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
🟢	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

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	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	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.a.iv (all Milestones are P4R in DY1)		
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25

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●	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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🟢	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**

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

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

Payment Snapshot		
Payment Available (DY1)	$	1,265,197.52
DY1 Payment Earned to Date	$	759,118.51
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	506,079.01
Funding Available for Distribution DY1Q2	$	253,039.50

2.b.iv Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	126,520	126,520
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**6.00**	**100%**	**80%**	**10%**	**126,520**	**126,520**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	126,520	126,520
	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%**	**126,520**	**126,520**
	Total	**Complete**	**21.00**	**21.00**	**100%**	**100%**	**20%**	**253,040**	**253,040**

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

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

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

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

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

Total						0.00

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

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

Payment Snapshot		
Payment Available (DY1)	$	1,096,153.01
DY1 Payment Earned to Date	$	657,691.81
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	438,461.21
Funding Available for Distribution DY1Q2	$	219,230.60

2.d.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	109,615	109,615
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**80%**	**10%**	**109,615**	**109,615**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	109,615	109,615
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**4.00**	**4.00**	**100%**	**20%**	**10%**	**109,615**	**109,615**
Total		**Complete**	**9.00**	**9.00**	**100%**	**100%**	**20%**	**219,231**	**219,231**

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

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

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

	Total	**0.00**

Domain 1 Project Prescribed Milestones - Project 2.d.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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●	7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2018	In Process	Pass & Ongoing	N/A
●	9. Measure PAM® components	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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🟢	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

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

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

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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)	$	1,125,780.60
DY1 Payment Earned to Date	$	675,468.36
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	450,312.24
Funding Available for Distribution DY1Q2	$	225,156.12

3.a.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	1/1/1900	80%	10%	112,578	112,578
	Project Implementation Speed	N/A	0.00	0.00	1/0/1900				
	Patient Engagement Speed	Complete	0.00	0.00	1/0/1900				
Domain 1 Subtotal			**5.00**	**5.00**	**1/1/1900**	**80%**	**10%**	**112,578**	**112,578**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	1/1/1900	20%	10%	112,578	112,578
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			**10.00**	**10.00**	**1/1/1900**	**20%**	**10%**	**112,578**	**112,578**
Total		**Complete**	**15.00**	**15.00**	**1/1/1900**	**100%**	**20%**	**225,156**	**225,156**

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

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Domain 1 Project Milestones - Project 3.a.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
🔴	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
🟢	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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

Total	0

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

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

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	●	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	In Process	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	In Process	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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●	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**

NEW YORK STATE | **Department of Health** | **Medicaid Redesign Team**

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

Payment Snapshot		
Payment Available (DY1)	$	830,149.11
DY1 Payment Earned to Date	$	498,089.46
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	332,059.64
Funding Available for Distribution DY1Q2	$	166,029.82

3.b.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	83,015	83,015
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**80%**	**10%**	**83,015**	**83,015**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	20%	10%	83,015	83,015
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**7.00**	**7.00**	**100%**	**20%**	**10%**	**83,015**	**83,015**
	Total	**Complete**	**12.00**	**12.00**	**100%**	**100%**	**20%**	**166,030**	**166,030**

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

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Domain 1 Project Milestones - Project 3.b.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🔴	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
🔴	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

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

Total	0.00

Domain 1 Project Prescribed Milestones - Project 3.b.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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

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●	16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

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

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

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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)	$	836,422.06
DY1 Payment Earned to Date		501853.2348
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	334,568.82
Funding Available for Distribution DY1Q2	$	167,284.41

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	Domain 1 Organizational	Complete	5.00	5.00	1/1/1900	80%	10%	83,642	83,642
	Project Implementation Speed	N/A	0.00	0.00	1/0/1900				
	Patient Engagement Speed	#REF!	1.00	1.00	1/1/1900				
	Domain 1 Subtotal		**6.00**	**6.00**	**1/1/1900**	**80%**	**10%**	**83,642**	**83,642**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	1/1/1900	20%	10%	83,642	83,642
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**6.00**	**6.00**	**1/1/1900**	**20%**	**10%**	**83,642**	**83,642**
	Total	**#REF!**	**12.00**	**12.00**	**1/1/1900**	**100%**	**20%**	**167,284**	**167,284**

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

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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
🔴	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan 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	In Process	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	In Process	Pass & Ongoing	N/A
●	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	In Process	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	In Process	Pass & Ongoing	N/A

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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) ±	Pass & Ongoing	1

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Total	6.00

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

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

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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.c.ii
Project Title	Implementation of evidence-based strategies in the community to address chronic disease-primary and secondary prevention strategies (adult only).

Payment Snapshot		
Payment Available (DY1)	$	829,426.05
DY1 Payment Earned to Date	$	497,655.63
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	331,770.42
Funding Available for Distribution DY1Q2	$	165,885.21

3.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%	82,943	82,943
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	#REF!	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**80%**	**10%**	**82,943**	**82,943**
Domain 3	Domain 3 Pay for Reporting (P4R)	#REF!	6.00	6.00	100%	20%	10%	82,943	82,943
	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%**	**10%**	**82,943**	**82,943**
	Total	**#REF!**	**11.00**	**11.00**	**100%**	**100%**	**20%**	**165,885**	**165,885**

Total Project 3.c.ii AVs Awarded: 11 out of 11

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Domain 1 Project Milestones - Project 3.c.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	*Please Select*	Pass & Ongoing	N/A
🔴	Module 2 - Project Implementation Speed	Ongoing	N/A	*Please Select*	Pass & Ongoing	N/A

NEW YORK STATE Department of Health | Medicaid Redesign Team

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

Domain 1 Project Prescribed Milestones - Project 3.c.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement Center for Disease Control (CDC)-recognized National Diabetes Prevention Programs (NDPP) and/or create partnerships with community sites to refer patients to CDC-recognized programs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	2. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	3. Identify high-risk patients (including those at risk for onset of diabetes or with pre-diabetes) and establish referral process to institutional or community NDPP delivery sites.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	4. Ensure collaboration with PCPs and program sites to monitor progress and provide ongoing recommendations.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	5. Establish lifestyle modification programs including diet, tobacco use, and exercise and medication compliance.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	6. Ensure coordination with Medicaid Managed Care organizations and Health Homes for eligible/involved patients. providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Total					**0.00**

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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) ±	Pass & Ongoing	1

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

Total	Page 60		6.00

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

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

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

Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015
Samaritan Medical Center - Project 4.a.iii

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

Payment Snapshot		
Payment Available (DY1)	$	638,020.04
DY1 Payment Earned to Date	$	382,812.02
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	255,208.01
Funding Available for Distribution DY1Q2	$	127,604.01

4.a.iii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q2)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	63,802	63,802
	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%**	**63,802**	**63,802**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	63,802	63,802
	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%**	**63,802**	**63,802**
	Total	**Complete**	**16.00**	**16.00**	**100%**	**100%**	**20%**	**127,604**	**127,604**

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

Hide Reviewer Comments

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

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●	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
●	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	TotalPage 63		**11.00**

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

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Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.b.ii
Project Title	Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings

Payment Snapshot		
Payment Available (DY1)	$	542,317.03
DY1 Payment Earned to Date	$	325,390.22
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	216,926.81
Funding Available for Distribution DY1Q2	$	108,463.41

4.b.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%	54,232	54,232
	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%**	**54,232**	**54,232**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	16.00	16.00	100%	20%	10%	54,232	54,232
	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		**16.00**	**16.00**	**100%**	**20%**	**10%**	**54,232**	**54,232**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**20%**	**108,463**	**108,463**

Total Project 4.b.ii AVs Awarded: 21 out of 21

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.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
🟢	Asthma emergency department visit rate per 10,000	Pass & Ongoing	1

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●	Asthma emergency department visit rate per 10,000 - Aged 0-4 years	Pass & Ongoing	1
●	Percentage of adults who are obese	Pass & Ongoing	1
●	Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years	Pass & Ongoing	1
●	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
●	Percentage of children and adolescents who are obese	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 heart attack hospitalization rate per 10,000	Pass & Ongoing	1

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

🟢	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
🟢	Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years	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		**16.00**