



| General Instructions | | |
|---------------------------------|--|-------|
| Step | Description/Link | Image |
| 1. Enable Content | Click "Enable Content" at the top of the screen to enable macros. | |
| 2. Review AV Scorecard Overview | The AV scorecard Overview is a summary of the report Click to Access AV Scorecard Overview | |

| Functionality | | |
|--|--|-------|
| Step | Description/Link | Image |
| 1. Print | All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports. | |
| 2. Access Detailed Project Reports and return to AV Scorecard Overview | The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview | |
| 3. Show or Hide reviewer comments | Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments. | |



Print Summary

Print All

PPS Information

| | |
|------------|---|
| Quarter | DY1, Q3 October 1, 2015 - December 31, 2015 |
| PPS | SBH Health System |
| PPS Number | 36 |

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.a.iii | 20.00 | 20.00 | 0.00 | 20.00 | \$ - | \$ - | \$ - | \$ - |
| 2.b.iii | 21.00 | 21.00 | 0.00 | 21.00 | \$ - | \$ - | \$ - | \$ - |
| 2.b.iv | 20.00 | 20.00 | 0.00 | 20.00 | \$ - | \$ - | \$ - | \$ - |
| 3.a.i | 16.00 | 16.00 | 0.00 | 16.00 | \$ - | \$ - | \$ - | \$ - |
| 3.b.i | 13.00 | 13.00 | 0.00 | 13.00 | \$ - | \$ - | \$ - | \$ - |
| 3.c.i | 12.00 | 12.00 | 0.00 | 12.00 | \$ - | \$ - | \$ - | \$ - |
| 3.d.ii | 9.00 | 9.00 | 0.00 | 9.00 | \$ - | \$ - | \$ - | \$ - |
| 4.a.iii | 16.00 | 16.00 | 0.00 | 16.00 | \$ - | \$ - | \$ - | \$ - |
| 4.c.ii | 16.00 | 16.00 | 0.00 | 16.00 | \$ - | \$ - | \$ - | \$ - |
| AV Adjustments (Column F) | | | | | | | | |
| Total | 163.00 | 163.00 | 0.00 | 163.00 | \$ - | \$ - | \$ - | \$ - |



**Department
of Health**

Medicaid
Redesign Team

Print Summary

Print All

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

*Achievement Value (AV) Scorecard
SBH Health System*



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | N/A | In Process | Pass & Ongoing | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Domain 1 Organizational AVs

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



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Domain 1 Organizational AVs

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

| Section 01 - Budget | | | | | | | |
|---|------------|--|-------------------|--------------------|------------------|---------------------------------|------------|
| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Quarterly Project Reports, Project Budget and Flow of Funds | | Module 1.1 - PPS Budget Report (Baseline) | Ongoing | N/A | Completed | Pass & Complete | 1 |
| | | | | | | | |
| | | Module 1.2 - PPS Budget Report (Quarterly) | Ongoing | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Module 1.3 - PPS Flow of Funds (Baseline) | Ongoing | N/A | Completed | Pass & Complete | |
| | | | | | | | |
| | | Module 1.4 - PPS Flow of Funds (Quarterly) | Ongoing | N/A | In Process | Pass (with Exception) & Ongoing | |
| | | (Percentages Only) The percentages reported in the Provider Import/Export Tool does not align with the percentages reported in MAPP. Please update all percentages to ensure alignment and accuracy during the DY1, Q4 reporting period. | | | | | |
| | | Quarterly Progress Reports | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 6/30/2015 | 6/30/2015 | 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 | 9/30/2015 | Completed | Pass & Complete | N/A |
| | ● | 6. Finalize partnership agreements or contracts with CBOs | N/A | 6/30/2016 | In Process | Pass & Ongoing | |
| | ● | 7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and | N/A | 6/30/2016 | In Process | Pass & Ongoing | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Domain 1 Organizational AVs

| | | | | | | | | |
|-----------------------------------|---|--|-----|-----------|------------|----------------|----------|--|
| Organizational | | | | | | | | |
| | ● | 8. Finalize workforce communication and engagement plan | N/A | 3/31/2016 | 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 | |



Save & Return

Print

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



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Domain 1 Organizational AVs

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



Save & Return

Print

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



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 12/31/2015 | Completed | Pass & Complete | 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 | 12/31/2015 | Completed | Pass & Complete | |
| | ● | 5. Develop a data security and confidentiality plan. | N/A | 3/31/2016 | In Process | Pass & Ongoing | |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | |
| | | | | | | | |
| IT Systems and Processes | | | | | | | 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 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 3/31/2016 | 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 | In Process | Pass & Ongoing | |
| | | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| | ● | 2. Finalize PPS-wide bed reduction plan. | N/A | 12/31/2018 | In Process | Pass & Ongoing | N/A |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 12/31/2015 | Completed | Pass & Complete | N/A |
| | | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Domain 1 Organizational AVs

| | | | | | | | |
|---|--------------------|--|-----|------------|----------------|----------------|----------|
| 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 |

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System AV Adjustments

Save & Return


Print

| 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 | 10.00 | 50.00 | 50.00 | 100% | 0.00 | 50.00 | 100% |
| Project Adjustments (applied to one project only) | Various | 10.00 | 113.00 | 113.00 | 100% | 0.00 | 113.00 | 100% |
| Total | | | 163.00 | 163.00 | 100% | 0.00 | 163.00 | 100% |

Hide Reviewer Comments

Organizational

Project Adjustments

| No AV Adjustments | |
|---|--|
|  | <i>Please note that there are no AV adjustments for SBH Health System in DY1, Q3</i> |





Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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) | \$ 4,323,264.60 |
| DY1 Initial Payment | \$ 2,593,958.76 |
| DY1 Q2 Payment Earned | \$ 864,652.92 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 864,652.92 |
| 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 |
| | | | | | | |
| | | | | | | |
| | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.i

| Total | | | | | | | 0.00 |
|--|--|-------------------|--------------------|------------------|-----------------|-------------|------|
| 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. | 06/30/2016 | 06/30/2016 | 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. | 03/31/2016 | 03/31/2016 | 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 | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.i

| | | | | | | |
|--------------|---|------------|------------|------------|----------------|-------------|
| ● | 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. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 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. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. | 6/30/2016 | 6/30/2016 | In Process | Pass & Ongoing | N/A |
| ● | 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes. | 3/31/2017 | 3/31/2017 | 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 | 12/31/2016 | 12/31/2016 | 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 | 0.33333333 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.i

| | | | |
|---|--|----------------|------------|
| | | | |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.33333333 |
| | | | |
| ● | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.33333333 |
| | | | |
| ● | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.i

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



Save & Return

Print

*Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.i*

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



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.iii

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

| Payment Snapshot | |
|---|-----------------|
| Payment Available (DY1) | \$ 3,481,226.36 |
| DY1 Initial Payment | \$ 2,088,735.81 |
| DY1 Q2 Payment Earned | \$ 696,245.27 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 696,245.27 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.a.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 | 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.iii AVs Awarded: 20 out of 20

Hide Reviewer Comments

| Domain 1 Project Milestones - Project 2.a.iii | | | | | | |
|---|--|-------------------|--------------------|------------------|-----------------|-------------|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
| ● | Module 1 - Major risks to implementation and mitigation strategies | Ongoing | N/A | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| | | | | | | |



Save & Return

Print

**Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.iii**

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

Domain 1 Project Prescribed Milestones - Project 2.a.iii

| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|---|-------------------|--------------------|------------------|-----------------|-------------|
| ● | 1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers. | 12/31/2016 | 12/31/2016 | In Process | Pass & Ongoing | N/A |



Save & Return

Print

**Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.iii**

| | | | | | | |
|--------------|---|------------|------------|------------|----------------|-------------|
| | | | | | | |
| ● | 6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments). | 12/31/2016 | 12/31/2016 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| Total | | | | | | 0.00 |

| Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iii (all Milestones are P4R in DY1) | | | |
|--|--|-----------------|-------------|
| AV Driving | Measure | Reviewer Status | AVs Awarded |
| ● | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.33333333 |
| | | | |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.33333333 |
| | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 SBH Health System - Project 2.a.iii

| | | | |
|---|--|----------------|------------|
| ● | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.33333333 |
| ● | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 SBH Health System - Project 2.a.iii

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



Save & Return

Print

*Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.a.iii*

| | | | |
|--------------|--|----------------|--------------|
| ● | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 |
| | | | |
| ● | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 |
| | | | |
| Total | | | 15.00 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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) | \$ 3,139,881.70 |
| DY1 Initial Payment | \$ 1,883,929.02 |
| DY1 Q2 Payment Earned | \$ 627,976.34 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 627,976.34 |
| 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 | | Complete | 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 |
| | | | | | | |
| | | | | | | |
| | | | | | | |



Save & Return

Print

**Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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 | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| ● | 3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care | 3/31/2018 | 3/31/2018 | Not Started | Pass & Ongoing | N/A |



Save & Return

Print

**Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iii**

| | | | | | | |
|--------------|--|------------|------------|------------|----------------|-------------|
| ● | 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.) | 03/31/2020 | 03/31/2020 | On Hold | 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 | 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 | 0.33333333 |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.33333333 |
| ● | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.33333333 |
| ● | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 SBH Health System - Project 2.b.iii

| | | | |
|---|--|----------------|------|
| ● | Children's Access to Primary Care- 12 to 24 months | Pass & Ongoing | 0.25 |
| ● | Children's Access to Primary Care- 25 months to 6 years | Pass & Ongoing | 0.25 |
| ● | Children's Access to Primary Care- 7 to 11 years | Pass & Ongoing | 0.25 |
| ● | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 0.5 |
| ● | Helpful, Courteous, and Respectful Office Staff (Q24 and 25) | Pass & Ongoing | 0.5 |
| ● | H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| ● | Medicaid Spending on ER and Inpatient Services ± | Pass & Ongoing | 1 |
| ● | Medicaid spending on Primary Care and community based behavioral health care | Pass & Ongoing | 1 |
| ● | PDI 90– Composite of all measures +/- | Pass & Ongoing | 1 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iii

| | | | |
|--------------|---|----------------|--------------|
| ● | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1 |
| ● | Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards | Pass & Ongoing | 1 |
| ● | Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement | Pass & Ongoing | 1 |
| ● | Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| ● | Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
| ● | PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| ● | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 |
| ● | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 |
| Total | | | 15.00 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iv

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

| Payment Snapshot | |
|--|-----------------|
| Payment Available (DY1) | \$ 3,181,178.42 |
| DY1 Initial Payment | \$ 1,908,707.05 |
| DY1 Q2 Payment Earned | \$ 636,235.68 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 636,235.68 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 2.b.iv 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 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.b.iv AVs Awarded: 20 out of 20

Hide Reviewer Comments

| 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 |
| | | | | | | |
| | | | | | | |
| | | | | | | |



Save & Return

Print

**Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iv**

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

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

| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|---|-------------------|--------------------|------------------|-----------------|-------------|
| ● | 1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 3. Ensure required social services participate in the project. | 3/31/2017 | 3/31/2017 | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 SBH Health System - Project 2.b.iv

| | | | | | | |
|--------------|---|-----------|-----------|------------|----------------|-------------|
| ● | 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 | 0.33333333 |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.33333333 |
| ● | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.33333333 |
| ● | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iv

| | | | |
|--|---|----------------|------|
| | | | |
| | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 2.b.iv

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



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.a.i

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

| Payment Snapshot | |
|--|-----------------|
| Payment Available (DY1) | \$ 2,864,529.66 |
| DY1 Initial Payment | \$ 1,718,717.80 |
| DY1 Q2 Payment Earned | \$ 572,905.93 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 572,905.93 |
| 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 | 1.00 | 1.00 | 100% | | | | |
| Domain 1 Subtotal | | | 6.00 | 6.00 | 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 | 16.00 | 16.00 | 100% | 100% | 0% | - | - |

Hide Reviewer Comments

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

| 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 |
| | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.a.i

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

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.a.i Model 1 | ● | 3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| 3.a.i Model 1 | ● | 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 |
| | | | | | | | |
| 3.a.i Model 1 | ● | 5. Co-locate primary care services at behavioral health sites. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.a.i

| | | | | | | | |
|---------------|---|--|-----------|-----------|------------|----------------|-----|
| 3.a.i Model 2 | ● | 6. Develop collaborative evidence-based standards of care including medication management and care engagement process. | 3/31/2017 | 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 |
| | | | | | | | |
| 3.a.i Model 3 | ● | 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 |
| | | | | | | | |
| | ● | 9. Implement IMPACT Model at Primary Care Sites. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| 3.a.i Model 3 | ● | 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 |
| | | | | | | | |
| 3.a.i Model 3 | ● | 12. Designate a Psychiatrist meeting requirements of the IMPACT Model. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| 3.a.i Model 3 | ● | 13. Measure outcomes as required in the IMPACT Model. | 3/31/2018 | 3/31/2018 | In Process | Pass & Ongoing | N/A |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.a.i

| | | | | | | | |
|--------------|--|--|-----------|-----------|------------|----------------|----------|
| | | | | | | | |
| | | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.a.i

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



Save & Return

Print

| | |
|-------|----|
| Total | 10 |
|-------|----|



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.b.i

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

| Payment Snapshot | |
|--|-----------------|
| Payment Available (DY1) | \$ 2,157,570.04 |
| DY1 Initial Payment | \$ 1,294,542.02 |
| DY1 Q2 Payment Earned | \$ 431,514.01 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 431,514.01 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 3.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 | 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 | 7.00 | 7.00 | 100% | 20% | 0% | - | - |
| | 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% | 0% | - | - |
| Total | | Complete | 13.00 | 13.00 | 100% | 100% | 0% | - | - |

Total Project 3.b.i AVs Awarded: 13 out of 13

Hide Reviewer Comments

| 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 | In Process | Pass & Ongoing | N/A |
| | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.b.i

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

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 ACPM 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 |



Save & Return

Print

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

SBH Health System - Project 3.b.i

| | | | | | | |
|---|--|-----------|-----------|------------|----------------|-----|
| | | | | | | |
| ● | 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. | 3/31/2019 | 3/31/2019 | 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. | 3/31/2017 | 3/31/2017 | 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. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| ● | 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. | 3/31/2017 | 3/31/2017 | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.b.i

| | | | | | | |
|--------------|--|-----------|-----------|------------|----------------|-------------|
| | | | | | | |
| ● | 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit. | 3/31/2017 | 3/31/2017 | In Process | Pass & Ongoing | N/A |
| | | | | | | |
| ● | 16. Facilitate referrals to NYS Smoker's Quitline. | 3/31/2017 | 3/31/2017 | 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 | 3/31/2020 | 3/31/2020 | 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 project. | 3/31/2020 | 3/31/2020 | 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 |
| | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.b.i

| | | | |
|---|--|----------------|------------|
| ● | Discussion of Risks and Benefits of Aspirin Use | Pass & Ongoing | 0.5 |
| ● | Controlling High Blood Pressure | Pass & Ongoing | 1 |
| ● | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 |
| ● | Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.33333333 |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.33333333 |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.33333333 |
| ● | Prevention Quality Indicator # 13 (Angina without procedure) ± | Pass & Ongoing | 1 |
| ● | Prevention Quality Indicator # 7 (HTN) ± | Pass & Ongoing | 1 |



Department
of Health

Medicaid
Redesign Team

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.b.i

Save & Return

Print

Total

7.00



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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) | \$ 2,269,035.22 |
| DY1 Initial Payment | \$ 1,361,421.13 |
| DY1 Q2 Payment Earned | 453807.0437 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 453,807.04 |
| 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 |
| | | | | | | |
| | | | | | | |
| | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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. | 3/31/2020 | 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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 SBH Health System - Project 3.c.i

| | | | | | |
|--------------|--|-----------|------------|----------------|-------------|
| ● | 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 |
| | | | | | |
| 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 | 0.33333333 |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.33333333 |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.33333333 |



Save & Return

Print

*Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.c.i*

| | | | |
|--|---|----------------|-------------|
| | | | |
| | Prevention Quality Indicator # 1 (DM Short term complication) ± | Pass & Ongoing | 1 |
| | | | |
| | Total | | 6.00 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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) | \$ 2,317,932.17 |
| DY1 Initial Payment | \$ 1,390,759.30 |
| DY1 Q2 Payment Earned | \$ 463,586.43 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 463,586.43 |
| 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 | | Complete | 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 |
| | | | | | | |
| | | | | | | |
| | | | | | | |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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. | 9/30/2017 | 9/30/2017 | 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 | In Process | Pass & Ongoing | N/A |
| ● | 5. Ensure coordinated care for asthma patients includes social services and support. | 9/30/2017 | 9/30/2017 | In Process | Pass & Ongoing | N/A |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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. | 9/30/2017 | 9/30/2017 | 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 |
| | | | | | | |
| 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 |
| | | | |



Save & Return

Print

*Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 3.d.ii*

| | | | |
|--------------|--|----------------|-------------|
| ● | Prevention Quality Indicator # 15 Younger Adult Asthma ± | Pass & Ongoing | 1 |
| Total | | | 4.00 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 4.a.iii

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

| Payment Snapshot | |
|--|-----------------|
| Payment Available (DY1) | \$ 1,638,438.00 |
| DY1 Initial Payment | \$ 983,062.80 |
| DY1 Q2 Payment Earned | \$ 327,687.60 |
| DY1 Payment Not Earned to Date | \$ (0.00) |
| DY1 Funding Remaining | \$ 327,687.60 |
| Funding Available for Distribution DY1Q3 | \$ - |

| 4.a.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 | 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 | | Complete | 16.00 | 16.00 | 100% | 100% | 0% | - | - |

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 |



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 4.a.iii

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



Department
of Health

Medicaid
Redesign Team

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 4.a.iii

Save & Return

Print

Total

11.00



Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - 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) | \$ 1,556,516.10 |
| DY1 Initial Payment | \$ 933,909.66 |
| DY1 Q2 Payment Earned | \$ 311,303.22 |
| DY1 Payment Not Earned to Date | \$ 0.00 |
| DY1 Funding Remaining | \$ 311,303.22 |
| 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 | | Complete | 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 |



Save & Return

Print

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



Department
of Health

Medicaid
Redesign Team

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
SBH Health System - Project 4.c.ii

Save & Return

Print

Total

11.00