

Achievement Value (AV) Scorecard Alliance for Better Health Care, LLC

	General Instructions									
Step	Click "Enable Content" at the top of the screen to									
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	SECURITY WARNING Macros have been disabled. Enable Content								
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.	Print All		
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	Project Link (Gifu on the purple files below to access each biofolding project report) Domain in Organizational (All Projects) AV Adjustments (Jollann F) 2 a 1 2 a 11 2 a 10 2 a 10 2 a 10 2 a 10		
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.	Hide Reviewer Comments		



Achievement Value (AV) Scorecard Alliance for Better Health Care, LLC

Print Summary

Print All

	PPS Information
Quarter	DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
PPS	Alliance for Better Health Care, LLC
PPS Number	3

	Achievement Value (AV) Scorecard Summary											
		AV I	Data			Payme	nt Data					
Project Link (click on the purple link below to access each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available		High Performance Funds	Total Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizati	-	e embedded w payment	ithin each				
2.a.i	19.00	19.00	0.00	19.00	\$ -	\$ -	\$ -	\$ -				
2.b.iii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.b.iv	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.b.viii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.d.i	8.00	8.00	0.00	8.00	\$ -	\$ -	\$ -	\$ -				
3.a.i	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -				
3.a.iv	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -				
3.d.ii	10.00	10.00	0.00	10.00	\$ -	\$ -	\$ -	\$ -				
3.g.i	7.00	7.00	0.00	7.00	\$ -	\$ -	\$ -	\$ -				



Print Summary

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Achievement Value (AV) Scorecard Alliance for Better Health Care, LLC

4.a.iii	16.00	16.00	0.00	16.00	\$ -	\$	-	\$ -	\$ -
4.b.i	14.00	14.00	0.00	14.00	\$ -	\$	-	\$ -	\$ -
AV Adjustments (Column F)									
Total	166.00	166.00	0.00	166.00	\$	- \$	-	\$ -	\$ -



Save & Return

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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Alliance for Better Health Care, LLC - Domain 1 Organizational AVs

Do	main I Organizati	onal 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										



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	11110					
		Define target workforce state (in line with DSRIP program's goals)	9/30/2016	9/30/2016	In Process	Pass & Ongoing
		Create a workforce transition roadmap for achieving defined target workforce	9/30/2016	9/30/2016	In Process	Pass & Ongoing
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Additional		3. Perform detailed gap analysis between current state assessment of workforce	9/30/2016	9/30/2016	In Process	Pass & Ongoing
Workforce Strategy		and projected future state	3, 33, 232	3,00,2020		
Budget Jpdates						
non AV-		4. Produce a compensation and benefit analysis, covering impacts on both				
driving)		retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	6/30/2016	Completed	Pass & Complete
`		partial placements				
		5. Develop training strategy	9/30/2016	9/30/2016	In Process	Pass & Ongoing
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing

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	PIIII						
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce							N/A
Strategy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

	Section 01 - Budget										
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded				
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete					



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	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly						
Project Reports,	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	In Process	Pass & Complete	
Project Budget and						
Flow of Funds	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	
		Total				

	Section 02 - Governance									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		1. Finalize governance structure and subcommittee structure	9/30/2015	9/30/2015	Completed	Pass (with Exception) & Complete				



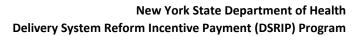
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Governance Structure Updates	•	Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	_
-	•	Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	1
Governance Process Update	•	Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	12/31/2015	12/31/2015	Completed	Pass & Complete	
_		6. Finalize partnership agreements or contracts with CBOs	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
Additional - Governance Milestones (non AV-	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
driving)		8. Finalize workforce communication and engagement plan	6/30/2016	6/30/2016	Completed	Pass & Complete	



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	•					
		9. Inclusion of CBOs in PPS Implementation	12/31/2015	12/31/2015	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Additional Governance						
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
			Total			





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Section 03 - Financial Sustainability							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete	
Financial Stability Update							
		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	Completed	Pass & Complete	
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional inancial							



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Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IV/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

	Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete		
Cultural								
Competency /Health Literacy		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	Completed	Pass & Complete	1	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		



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	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Cultural Competency						N/A
/Health Literacy	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Topic Areas						
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				1

	Section 05 - IT Systems and Processes									
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded			
Measure	Driving	ivillestorie	Date	Date	Status					
	•	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).	9/30/2015	9/30/2015	Completed	Pass & Complete				



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	Develop an IT Change Management Strategy.	9/30/2016	9/30/2016	In Process	Pass & Ongoing
IT Systoms					
IT Systems and Processes	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	3/31/2016	3/31/2016	Completed	Pass & Complete
	4. Develop a specific plan for engaging attributed members in Qualifying Entities	3/31/2017	3/31/2017	In Process	Pass & Ongoing
	5. Develop a data security and confidentiality plan.	12/31/2016	12/31/2016	In Process	Pass & Ongoing
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
A dalisi a a al					
Additional – IT Systems	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
and Processes					
Tonic Arosc L					



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TOPIC ATEAS		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
			-			
			Total			

	Section 06 - Performance Reporting							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
	•	Establish reporting structure for PPS-wide performance reporting and communication.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
Performanc e Reporting	•	Develop training program for organizations and individuals throughout	9/30/2016	9/30/2016	In Process	Pass & Ongoing		
		the network, focused on clinical quality and performance reporting.	3,33,232	3,33,2323		,	N/A	
	•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		

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1	Print						
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc							N/A
e Reporting Topic Areas		Key Stakeholders	N/A	N/A	Completed	Pass & Complete	IN/ <i>P</i>
		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		
		1. Develop Practitioners communication and engagement plan.	12/31/2015	12/31/2015	Completed	Pass & Complete			



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•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			,		. 300 31 5.1.65.11.6	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
	•	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk Mitigation Strategies Major Dependencies on Organizational Workstreams Roles and Responsibilities Key Stakeholders IT Expectations	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk Mitigation Strategies Major Dependencies on Organizational Workstreams Roles and Responsibilities N/A Key Stakeholders N/A IT Expectations N/A	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk Mitigation Strategies Major Dependencies on Organizational Workstreams N/A Roles and Responsibilities N/A N/A N/A N/A IT Expectations N/A N/A N/A N/A N/A N/A N/A	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk Mitigation Strategies Major Dependencies on Organizational Workstreams N/A N/A In Process Roles and Responsibilities N/A N/A In Process Key Stakeholders N/A N/A In Process IT Expectations N/A N/A In Process	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk Mitigation Strategies Major Dependencies on Organizational Workstreams N/A N/A In Process Pass & Ongoing Major Dependencies on Organizational 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



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Alliance for Better Health Care, LLC - Domain 1 Organizational AVs

Total 0

		Section	n 08 - Population I	Health Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Develop population health management roadmap.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
Population Health							,
		2. Finalize PPS-wide bed reduction plan.	6/30/2017	6/30/2017	In Process	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Population							N/A
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	14/75
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



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Prin			Alliai	nce for Better H	ealth Care, LLC - Domain 1 Org
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
		Total			

		:	Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Perform a clinical integration 'needs assessment'.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
Clinical _ Integration							IN/A
		2. Develop a Clinical Integration strategy.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							NI/A



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Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	<u>'</u>
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
				-			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				



Save & Return
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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
Alliance for Better Health Care, LLC AV Adjustments

	AV	Adjustment	Scoresheet						
		Total	Total AVs	Total AV	Awarded	Adjusted	Net A	Vs Awarded	
Adjustment	Proiect	Projects	Available	Net	Percentage	Aujusteu AVs	Net	Davagataga AV	
		Selected	elected Available	Awarded	AV	AVS	Awarded	Percentage AV	
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%	
Project Adjustments (applied to one project only)	Various	11.00	111.00	111.00	100%	0.00	111.00	100%	
Total			166.00	166.00	100%	0.00	166.00	100%	

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Alliance for Better Health Care, LLC in DY2, Q1



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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			

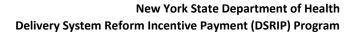
Payment Snapshot	
Payment Available (DY2)	\$ 5,763,863.87
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 5,408,205.11

			2.a.i Score	sheet							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-		
	Patient Engagement Speed	N/A	0.00	0.00	0%						
	Domain 1 Subtotal		5.00	5.00	100%	60%	0%	-	-		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	40% 0%	-	-		
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 2 Subtotal		14.00	14.00	100%	40%	0%	-	-		
	Total	Complete	19.00	19.00	100%	100%	0%	-	-		

Total Project 2.a.i AVs Awarded: 19 out of 19

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		





	Print			Alliance fo	r Better Health Care, LLC -	Project 2.a.i
					Pass & Ongoing	
Total						0.00
	Domain 1 Project Prescribed					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
•	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



Print			Alliance Joi	r Better Health Care, LLC -	Project 2.a.i
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
					0.00
Total					

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



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



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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	N/A
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



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Qu Alliance for Better Health Care, LLC - Proje					
	Primary Care - Usual Source of Care - Q2		Pass & Ongoing	0.5	
		Total		14.00	



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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 (DY2)	\$	4,393,135.35			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	3,984,655.38			

			2.b.iii Score	esheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)											
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	60% 09	60% 0%												
Domain 1	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%	60%	0%	-	-											
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-											
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-											
	Domain 2 Subtotal		14.00	14.00	100%	40%	0%	-	-											
	Total	Complete	20.00	20.00	100%	100%	0%	-	-											

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

Hide Reviewer Comments

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



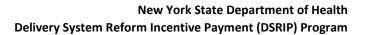
Print			Alliance for	Better Health Care, LLC - P	roject 2.b.iii
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.					
Total					1.00

	Domain 1 Project Prescribed I	Milestones - F	Project 2.b.iii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Establish ED care triage program for at-risk populations	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Participating EDs will establish partnerships to community primary	I				
•	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



Print			Alliance for	Better Health Care, LLC - F	roject 2.b.iii
 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	In Process	Pass & Ongoing	N/A
4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2020	3/31/2020	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

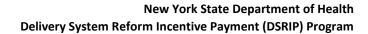
	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iii (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333						





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Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5





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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



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 2.b.iii

Print

Total		14.00
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
reimbursement		
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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 (DY2)	\$ 4,381,114.65
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 3,973,752.38

			2.b.iv Score	esheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)											
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%														
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		0%	-	-											
	Patient Engagement Speed	Complete	1.00	1.00	100%															
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-											
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-											
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-											
	Domain 2 Subtotal			14.00	100%	40%	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		



Print			Alliance for	Better Health Care, LLC - P	roject 2.b.iv
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY.					
Total					1.00

	Domain 1 Project Prescribed I	Milestones - F	Project 2.b.iv			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	 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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Ensure required social services participate in the project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



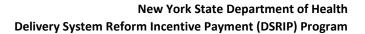
Print			Alliance for	Better Health Care, LLC - F	roject 2.b.iv
4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

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



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	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 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





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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	N/A



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 2.b.iv

Print Potentially Avoidable Emergency Room Visits

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		14.00



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 2.b.viii

Project Snapshot						
Project Domain	System Transformation Projects (Domain 2)					
Project ID	2.b.viii					
Project Title	Hospital-Home Care Collaboration Solutions					

Payment Snapshot					
Payment Available (DY2)	\$	4,474,166.26			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	4,058,151.92			

			2.b.viii Scor	esheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)						
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		0%	-	-						
	Patient Engagement Speed	Complete	1.00	1.00	100%										
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-						
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-						
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-						
	Domain 2 Subtotal			14.00	100%	40%	0%	-	-						
Total Complete			20.00	20.00	100%	100%	0%	-	-						

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

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.b.viii							
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	



Print			Alliance for B	Setter Health Care, LLC - Pro	oject 2.b.viii		
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1		
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.							
Total					1.00		

	Domain 1 Project Prescribed Milestones - Project 2.b.viii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
•	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A	
	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
	based medicine and cinomic care management.						
•	3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	



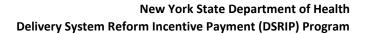
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4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
8. Integrate primary care, penavioral nealth, pharmacy, and other services into the model in order to enhance coordination of care and medication management	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



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11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
12. 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.viii (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333					
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1					





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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



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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	N/A
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1



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Print Alliance for E	setter Health Care, LLC - Pro	oject 2.b.vIII
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		14.00



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 2.d.i

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

Payment Snapshot					
Payment Available (DY2)	\$	3,643,172.13			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	3,361,397.64			

			2.d.i Score	sheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)											
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%														
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		0%	-	-											
	Patient Engagement Speed	Complete	1.00	1.00	100%															
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-											
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	40%	0%	-	-											
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-											
Domain 2 Subtotal		2.00	2.00	100%	40%	0%	-	-												
	Total	Complete	8.00	8.00	100%	100%	0%	-	-											

Total Project 2.d.i AVs Awarded: 8 out of 8

Hide Reviewer Comments

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



Save & Return

Print			Alliance fo	r Better Health Care, LLC -	Project 2.d.i		
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1		
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.							
Total					1.00		

	Domain 1 Project Prescribed	Milestones -	Project 2.d.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
•	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Establish a PPS-wide training team, comprised of members with	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	III Process	rass & Oligoling	N/A
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
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Print			Alliance fo	r Better Health Care, LLC -	Project 2.d.i
4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	-	-			
9. Measure PAM® components	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	 Survey the targeted population about healthcare needs in the PPS' region. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. Include beneficiaries in development team to promote preventive care. Measure PAM® components Increase the volume of non-emergent (primary, behavioral, dental) 	4. Survey the targeted population about healthcare needs in the PPS' region. 3/31/2017 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency. 6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. 8. Include beneficiaries in development team to promote preventive care. 3/31/2017 9. Measure PAM® components 3/31/2017	4. Survey the targeted population about healthcare needs in the PPS' region. 3/31/2017	4. Survey the targeted population about healthcare needs in the PPS' region. 3/31/2017 3/31/2017 In Process 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency. 6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. 8. Include beneficiaries in development team to promote preventive care. 9. Measure PAM® components 3/31/2017 3/31/2017 In Process 10. Increase the volume of non-emergent (primary, behavioral, dental) 3/31/2017 3/31/2017 In Process	4. Survey the targeted population about healthcare needs in the PPS' region. 3/31/2017 3/31/2017 In Process Pass & Ongoing 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency. 6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. 8. Include beneficiaries in development team to promote preventive care. 9. Measure PAM® components 3/31/2017 3/31/2017 In Process Pass & Ongoing 10. Increase the volume of non-emergent (primary, behavioral, dental) 3/31/2017 3/31/2017 In Process Pass & Ongoing



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•	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
•	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.d.i (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	N/A				
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	N/A				
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	N/A				
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	N/A				
	ED use by uninsured	Pass & Ongoing	1				



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PAM Level	Pass & Ongoing	N/A
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1
Total		2.00



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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 (DY2)	\$	3,729,287.88			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	3,499,172.47			

	3.a.i Scoresheet								
Domain	Domain Component		AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	16%	0%	-	-
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	24%	0%	-	-
	Domain 3 Subtotal			10.00	100%	40%	0%	-	-
	Total Complete			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	Achievement Value	(AV) Scoreca	rd DY2, Q1 A	-	lune 30, 2016 (Non-Payme	
Print				Alliance fo	r Better Health Care, LLC -	Project 3.a.i
Module 3 - Patient Engager	nent Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
	submitted with your DY2 Q1 quarterly report 11 Actively Engaged data will be subject to re					
quarterly review. The D12 of	Total	nearation in t	712 Q2 diong	with the Acti	very Engagea data reported	1

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3 ✓ 3.a.i Model 3 ✓ 3.a.i Model 1 ✓ 3.a.i Model 2 AVRequired Committed Milestone **Project Requirement and Metric/Deliverable** Model **Reviewer Status AVs Awarded** Driving **Due Date Due Date** Status 1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must Pass & Ongoing 3/31/2018 3/31/2018 In Process N/A meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3. 2. Develop collaborative evidence-based standards of care Pass & Ongoing including medication management and care engagement 3/31/2017 3/31/2017 In Process N/A process. 3.a.i Model 1



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		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.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
		Use EHRs or other technical platforms to track all patients				2 00 :	
		engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		5. Co-locate primary care services at behavioral health sites.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
		Develop collaborative evidence-based standards of care including medication management and care engagement	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		process.					,
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
		Use EHRs or other technical platforms to track all patients	2/24/2047	2/24/2047		Dans 8 Out to 1	21/2
		engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A



	Print				Amance jo	r Better Health Care, LLC -	rroject 3.u.i
	•	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		Total					0



Print

AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 3.a.i

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



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 3.a.iv

	Project Snapshot							
Project Domain Clinical Improvement Projects (Domain 3)								
Project ID 3.a.iv								
Project Title	Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal services) capabilities and appropriate enhanced abstinence services within community-based addiction treatment programs							

Payment Snapshot						
Payment Available (DY2)	\$	3,761,782.38				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	3,470,834.20				

	3.a.iv Scoresheet															
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)							
	Domain 1 Organizational	Complete	5.00	5.00	100%	60% 0%										
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		0%	-	-							
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-							
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	16%	0%	-	-							
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	24%	0%	-	-							
	Domain 2 Subtotal			10.00	100%	40%	0%	-	-							
	Total	Complete	16.00	16.00	100%	100%	0%	-	-							

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

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	Domain 1 Project Milestones - Project 3.a.iv								
AV Dri ving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			



Print			Alliance for	Better Health Care, LLC - P	roject 3.a.iv	
Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A	
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1	
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as a quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported						
Total					1.00	

	Domain 1 Project Prescribed Milestones - Project 3.a.iv								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A			
	Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A			
	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A			



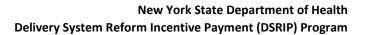
	Print			_		-
•	4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	Develop community-based withdrawal management (ambulatory	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	in Process	Pass & Oligoling	N/A
	6. Develop care management services within the SUD treatment program.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	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.a.iv (all Milestones are P4R in DY1)								
AV Dri ving	Measure	Reviewer Status	AVs Awarded					



Print

Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5





Print Alliance for	Better Health Care, LLC - F	roject 3.a.iv
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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 (DY2)	\$	3,018,688.41				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	2,738,006.47				

	3.d.ii Scoresheet																	
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)									
	Domain 1 Organizational	Complete	5.00	5.00	100%	60% 0%	60%	60%	60%	60%	60%	60%	60%	60%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%										0%	-	-	
	Patient Engagement Speed	Complete	1.00	1.00	100%													
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-									
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	16%	0%	-	-									
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	24%	0%	-	-									
	Domain 2 Subtotal			4.00	100%	40%	0%	-	-									
	Total	Complete	10.00	10.00	100%	100%	0%	-	-									

Total Project 3.d.ii AVs Awarded: 10 out of 10

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	Domain 1 Project Milestones - Project 3.d.ii						
AV Driving		Project Requirement and Metric/Deliverable	Required Due Date	Reviewer Status			
		Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A



Print			Alliance for	Better Health Care, LLC - F	roject 3.a.ii
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly repor quarterly review. The DY2 Q1 Actively Engaged data will be subject to re		•		•	-
Total					1.00

	Domain 1 Project Prescribed I	Milestones - F	Project 3.d.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	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
	Develop and implement evidence-based asthma management widelings	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	guidelines.					



	Print					
•	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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2018	3/31/2018	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 Dri ving	Measure	Reviewer Status	AVs Awarded					



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 3.d.ii

Print

Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5
Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1
Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1
Total		4.00



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 3.g.i

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

Payment Snapshot	
Payment Available (DY2)	\$ 2,285,925.89
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 2,144,873.02

			3.g.i Score	sheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	5.00	100%								
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	60%	60%	60%	60% 0%	0%	-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%								
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-				
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	1.00	1.00	100%	16%	0%	-	-				
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	24%	0%	-	-				
	Domain 2 Subtotal		1.00	1.00	100%	40%	0%	-	-				
	Total	Complete	7.00	7.00	100%	100%	0%	-	-				

Total Project 3.g.i AVs Awarded: 7 out of 7

Hide Reviewer Comments

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



Print			Alliance fo	r Better Health Care, LLC -	Project 3.g.i
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly report quarterly review. The DY2 Q1 Actively Engaged data will be subject to re-		•		•	-
Total					1.00

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



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5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status						
	Proxy Palliative Care Measure	Pass & Ongoing	1					
	Total							



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 4.b.i

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

Payment Snapshot	
Payment Available (DY2)	\$ 2,436,332.00
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 2,285,998.33

	4.b.i Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		0%	-	-		
	Patient Engagement Speed	N/A	0.00	0.00	0%						
	Domain 1 Subtotal		5.00	5.00	100%	60%	0%	-	-		
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	40%	0%	-	-		
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-		
Domain 4 Subtotal			9.00	9.00	100%	40%	0%	-	-		
	Total	Complete	14.00	14.00	100%	100%	0%	-	-		

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

Hide Reviewer Comments

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



Print		-
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Percentage of cigarette smoking among adults	Pass & Ongoing	1
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 4.b.i

Print

	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Total		9.00



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - 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					

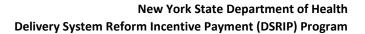
Payment Snapshot	
Payment Available (DY2)	\$ 2,118,549.56
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,987,824.63

4.a.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	0%	-	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				-
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	60%	0%	-	-
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	40%	0%	-	-
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	40%	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)						
4	NV Driving	Measure	Reviewer Status	AVs Awarded			
ľ		Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1			





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	Age-adjusted suicide death rate per 100,000	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 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



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Alliance for Better Health Care, LLC - Project 4.a.iii

Print

	Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total			11.00