

Achievement Value (AV) Scorecard Bronx-Lebanon Hospital Center

	General Instructions									
Step	Description/Link	Image								
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 (Glick on the purple flink below to access each lookshads project report) Domain 1- Organizational [All Projects] All Adjustments (Joliumn 2) 2 a 11 2 a 11 2 a 10 2 a 10 2 a 10 2 a 10 3 a 11								
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 Bronx-Lebanon Hospital Center

Print Summary

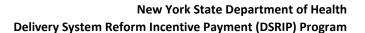
Print All

	PPS Information						
Quarter	DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)						
PPS	Bronx-Lebanon Hospital Center						
PPS Number	27						

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	Payment Earned	High Performance Funds	Total Payment Earned			
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizati	•	e embedded w payment	ithin each			
2.a.i	19.00	19.00	0.00	19.00	\$ -	\$ -	\$ -	\$ -			
2.a.iii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -			
2.b.i	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -			
2.b.iv	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -			
3.a.i	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -			
3.c.i	12.00	12.00	0.00	12.00	\$ -	\$ -	\$ -	\$ -			
3.d.ii	10.00	10.00	0.00	10.00	\$ -	\$ -	\$ -	\$ -			
3.f.i	13.00	13.00	0.00	13.00	\$ -	\$ -	\$ -	\$ -			
4.a.iii	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -			



Print Summary Print All								Achieve Bror		Value (A panon Ho	-	
4.c.ii	16.00	16.00	0.00	16.00	\$	-	\$	-	\$	-	\$	-
AV Adjustments (Column F)												
Total	162.00	162.00	0.00	162.00	ć		ć		Ċ	_	Ċ	





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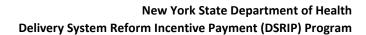
Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Bronx-Lebanon Hospital Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

	Workforce Strategy									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		Workforce Strategy Budget Updates	3/31/2016	9/30/2016	In Process	Pass & Ongoing				
Workforce Strategy		Workforce Impact Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing				
Budget Updates										





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		New Hire Employment Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing	
		Define target workforce state (in line with DSRIP program's goals)	3/31/2016	3/31/2016	Completed	Pass & Complete	
		Create a workforce transition roadmap for achieving defined target workforce	9/30/2016	9/30/2016	In Process	Pass & Ongoing	
dditional /orkforce		3. Perform detailed gap analysis between current state assessment of workforce	9/30/2016	9/30/2016	In Process	Pass & Ongoing	
trategy udget		and projected future state					
pdates non AV- riving)	•	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	6/30/2016	6/30/2016	Completed	Pass & Complete	
		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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		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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Quarterly Project Reports, Project Budget and Flow of						
		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
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 & Complete			
		2. Establish a clinical governance							
Governance		structure, including clinical quality	12/31/2015	12/31/2015	Completed	Pass & Complete			
Structure		committees for each DSRIP project							



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Updates							
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
rocess pdate	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	3/31/2016	3/31/2016	Completed	Pass & Complete	
dditional							
Governance Milestones non AV- Iriving)	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	06/30/2018	06/30/2018	In Process	Pass & Ongoing	
arrying)							
		8. Finalize workforce communication and engagement plan	06/30/2016	06/30/2016	Completed	Pass & Complete	
			06/30/2016	06/30/2016	Completed	Pass & Comp	olete

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	9. Inclusion of CBOs in PPS Implementation	6/30/2016	6/30/2016	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	N/A
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				1



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete	
Financial Stability		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	Completed	Pass & Complete	1
Update	Jpdate						
		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	
Additional Financial							NI/A
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A



P	rint			В	ronx-Lebanon F	lospital Center - Domain 1 Org
	IT Expectations		N/A	N/A	In Process	Pass & Ongoing
	Progress Report	ing	N/A	N/A	In Process	Pass & Ongoing
			Total			

		Section 04	- Cultural Compe	tency & Health I	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	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing	



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Additional Cultural Competency /Health Literacy Topic Areas							
	•	Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing	
							N/
	•	Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	IN//
		IT Expectations	N/A	N/A	In process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In process	Pass & Ongoing	
			Total				1

		Sect	tion 05 - IT Syster	ns and Processe	S		
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving	Willestone	Date	Date	Status		Av Awarucu
		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).	6/30/2016	6/30/2016	Completed	Pass & Complete	



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		2. Develop an IT Change Management Strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete	
IT Court a mar							
IT Systems and Processes	•	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2015	12/31/2015	Completed	Pass & Complete	
		5. Develop a data security and confidentiality plan.	9/30/2015	9/30/2015	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	
۸ ما مانه: م. م. م. ا							
Additional - IT Systems and		Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing	NI /
Processes							N/
Topic Areas		Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	

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	Progress Reporting	N/A	N/A	In process	Pass & Ongoing
		Total			

		Sec	ction 06 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performanc	•	Establish reporting structure for PPS-wide performance reporting and communication.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
e Reporting	•	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2018	6/30/2018	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	



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		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc e Reporting Topic Areas							N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				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.	12/31/2016	12/31/2016	In process	Pass & Ongoing			
Practitioner Engagement	•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A		



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		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing							
		Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing	N/A						
	•	Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing							
dditional ractitioner													
Ingagement opic Areas		Key Stakeholders	N/A	N/A	In process	Pass & Ongoing							
		IT Expectations	N/A	N/A	In process	Pass & Ongoing							
		Progress Reporting	N/A	N/A	In process	Pass & Ongoing							
			Total				0						

Section 08 - Population Health Management								
Process A) Measure Driv		Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	



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		Develop population health management roadmap.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
Population							IN/A
Health		2. Finalize PPS-wide bed reduction plan.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N1/A
							N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing	
		<u> </u>					
		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 opulation							
lealth Topic		Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In process	Pass & Ongoing	



Save & Return

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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Bronx-Lebanon Hospital Center - Domain 1 Organizational AVs

Total 0

Section 09 - Clinical Integration									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awa		
		1. Perform a clinical integration 'needs assessment'.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A		
Clinical Integration									
		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			
dditional Clinical							N/A		
ntegration opic Areas		Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	14/74		



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Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Bronx-Lebanon Hospital Center - Domain 1 Organizational AVs IT Expectations N/A N/A In process Pass & Ongoing Progress Reporting N/A N/A In process Pass & Ongoing

Total



Save & Return

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AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	AVs Awarded	
Adjustment	Project	Projects	ojects Available	Net	Percentage	Aujusteu AVs	Net	Percentage AV	
		Selected		Awarded	AV	AVS	Awarded	reiteiltage 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	112.00	112.00	100%	0.00	112.00	100%	
Total				162.00	100%	0.00	162.00	100%	

Hic	de Reviewer Comments	Organizational	Project Adjustments						
	No AV Adjustments								
	Please note that there are no AV adjustments for Bronx-Lebanon Hospital Center in DY2, Q1								



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

Bronx-Lebanon Hospital Center - Project 2.a.i

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

Payment Snapshot						
Payment Available (DY2)	\$	2,022,540.88				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	1,859,785.35				

	2.a.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% 0%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%		-	-
	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%	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			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			Bronx	-Lebanon Hospital Center	- Project 2.a.i
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.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In process	Pass & Ongoing	N/A



5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In process	Pass & Ongoing	N/
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,
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,
8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N,
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,
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N,
	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 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. 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. 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 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. 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. 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. 3/31/2019	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 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. 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. 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. 3/31/2017 3/31/2018 3/31/2018 3/31/2019 3/31/2019	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 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. 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. 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. 3/31/2019 3/31/2019 3/31/2019 3/31/2019 3/31/2019 In process	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 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. 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. 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. 9. Re-enforce the transition towards value-based payment reform by 10. Re-enforce the transition towards value-based payment reform by 2/31/2019 3/31/2019 3/31/2019 3/31/2019 3/31/2019 3/31/2019 3/31/2019 3/31/2019 10. process Pass & Ongoing Pass & Ongoing



Print

	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 appropriate.	3/31/2019	3/31/2019	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					
	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					



Print	x-Lebanon Hospital Center -	- Project 2.a.i
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
PDI 90– Composite of all measures +/-	Pass & Ongoing	1



Print	-Lebanon Hospitai Center -	Project 2.a.i
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
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5



Save & Return

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

Bronx-Lebanon Hospital Center - Project 2.a.i

Print

Total 14.00



Print

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

Bronx-Lebanon Hospital Center - 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 (DY2)	\$ 1,510,853.51
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,393,999.30

	2.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%															
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	14.00	100%	40%	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		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			Bronx-L	ebanon Hospital Center - P	roject 2.a.iii		
					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 part of the 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 - P	roject 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.	9/30/2018	9/30/2018	In process	Pass & Ongoing	N/A



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

Bronx-Lebanon Hospital Center - Project 2.a.iii

Print 4. Ensure that EHR systems used by participating safety net providers 9/30/2018 Pass & Ongoing 9/30/2018 In process N/A meet Meaningful Use and PCMH Level 3 standards and/or APCM. 5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all Pass & Ongoing 9/30/2018 9/30/2018 In process N/A participating safety net providers. 6. Develop a comprehensive care management plan for each patient to 9/30/2018 9/30/2018 In process Pass & Ongoing N/A engage him/her in care and to reduce patient risk factors. 7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly 3/31/2017 Pass & Ongoing N/A 3/31/2017 In process delineate roles and responsibilities for both parties. 8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. 3/31/2017 3/31/2017 Pass & Ongoing N/A In process Where necessary, the provider will work with local government units (such as SPOAs and public health departments). 9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic 3/31/2017 3/31/2017 Pass & Ongoing In process N/A diseases. Develop educational materials consistent with cultural and linguistic needs of the population.



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

Bronx-Lebanon Hospital Center - Project 2.a.iii

Print

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
	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



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

Bronx-Lebanon Hospital Center - Project 2.a.iii

Print 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 Pass & Ongoing Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) 0.5 Helpful, Courteous, and Respectful Office Staff (Q24 and 25) Pass & Ongoing 0.5 Pass & Ongoing H-CAHPS – Care Transition Metrics 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



1	Fillit		
	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
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5



Save & Return

Print

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

Bronx-Lebanon Hospital Center - Project 2.a.iii

Total 14.00



Print

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

Bronx-Lebanon Hospital Center - Project 2.b.i

Project Snapshot							
Project Domain System Transformation Projects (Domain 2)							
Project ID	2.b.i						
Project Title	Ambulatory ICUs						

Payment Snapshot					
Payment Available (DY2)	\$	1,240,785.04			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	1,144,818.79			

	2.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%			-	
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 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 Total Complete			14.00	14.00	100%	40%	0%	-	-
		Complete	20.00	20.00	100%	100%	0%	-	-

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

Hide Reviewer Comments

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



Print			Bronx-	Lebanon Hospital Center -	Project 2.b.i
					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 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 Milestones - Project 2.b.i						
AV Driving	ng Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
•	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A	
	Ensure Ambulatory ICU is integrated with all relevant Health Homes in						
•	the community.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A	
•	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A	



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

Bronx-Lebanon Hospital Center - Project 2.b.i

Print 4. Establish care managers co-located at each Ambulatory ICU site. 3/31/2017 3/31/2017 In process Pass & Ongoing N/A 5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and 3/31/2019 3/31/2019 Pass & Ongoing N/A In process sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up. 6. Ensure that EHR systems used by participating providers meet 3/31/2019 3/31/2019 Pass & Ongoing In process N/A Meaningful Use and PCMH Level 3 standards and/or APCM. 7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-3/31/2019 3/31/2019 In process Pass & Ongoing N/A management. 8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the 3/31/2017 3/31/2017 In process Pass & Ongoing N/A input of multiple providers. 9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care 3/31/2019 3/31/2019 Pass & Ongoing N/A In process and utilization. 10. Use EHRs and other technical platforms to track all patients engaged 3/31/2017 3/31/2017 In process Pass & Ongoing N/A in the project.



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

Bronx-Lebanon Hospital Center - Project 2.b.i

Print

Total 0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.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					
	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					



)	Print		
	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



Print		
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/
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5



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Print

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

Bronx-Lebanon Hospital Center - Project 2.b.i

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)

Bronx-Lebanon Hospital Center - 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)	\$ 1,483,183.24
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,368,469.14

	2.b.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%	60%		-	-
	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	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			Bronx-L	ebanon Hospital Center - P	Project 2.b.iv	
					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 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 N	Milestones - P	roject 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			Bronx-L	ebanon Hospital Center - F	Project 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					

	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					





)	Print		
	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



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



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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)

Bronx-Lebanon Hospital Center - Project 3.a.i

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

Payment Snapshot	
Payment Available (DY2)	\$ 1,278,025.84
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,179,179.26

			3.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%	60%										
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	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 E	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	e (AV) Scorecc	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme	
	Print				Bronx-	Lebanon Hospital Center -	Project 3.a.i
							N/A
	Module 3 - Patient Engagen	nent Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
	, , ,	a submitted with your DY2 Q1 quarterly report Q1 Actively Engaged data will be subject to rei		•		•	-
		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	3		
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	•	Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In process	Pass & Ongoing	N/A
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
3.a.i Model 1							



	Print						,
	•	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
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		5. Co-locate primary care services at behavioral health sites.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
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.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A

Save & Return

	Print				Bronx-	Lebanon Hospital Center -	Project 3.a
	•	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		44. Further haired Dannelin Con Management in					
		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
		13. Measure outcomes as required in the IMPACT Model.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2019	3/31/2019	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



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

Bronx-Lebanon Hospital Center - Project 3.a.i

Print Meas AV Driving **Reviewer Status AVs Awarded** ure 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	nx-Lebanon Hospital Center -	Project 3.u
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



Print

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

Bronx-Lebanon Hospital Center - Project 3.c.i

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

Payment Snapshot	
Payment Available (DY2)	\$ 1,013,705.73
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 935,302.52

3.c.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%	60%								
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	6.00	6.00	100%	16%	0%	-	-						
Domain 5	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	24%	0%	-	-						
	Domain 2 Subtotal		6.00	6.00	100%	40%	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							
V 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			Bronx	Lebanon Hospital Center -	Project 3.c.i		
					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 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 3.c.i							
AV Driving	ving Project Requirement and Metric/Deliverable		Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	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	3/31/2017	In process	Pass & Ongoing	N/A		
	improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	iii process	1 ass & Ongoing	IN/A		
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	In process	Pass & Ongoing	N/A		



Print		ьгопх-	-Lebanon Hospitai Center	Project 3.c.i
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
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



Save & Return

Print		
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 # 1 (DM Short term complication) ±	Pass & Ongoing	1
Total		6.00



Print

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

Bronx-Lebanon Hospital Center - Project 3.d.ii

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

Payment Snapshot	
Payment Available (DY2)	\$ 1,084,955.89
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,001,041.96

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%									
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	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

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	



Print			Bronx-l	ebanon Hospital Center - F	Project 3.d.ii
					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 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.	6/30/2015	6/30/2015	Completed	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 exposure	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
	Develop and implement evidence-based asthma management widelings	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
	guidelines.					



	Print			Bronx-L	Lebanon Hospital Center - I	Project 3.d.ii
•	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.	6/30/2019	6/30/2019	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.	3/31/2017	3/31/2017	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
	iotai					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				



Save & Return

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



Print

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

Bronx-Lebanon Hospital Center - Project 3.f.i

Project Snapshot							
Project Domain Clinical Improvement Projects (Domain 3)							
Project ID	3.f.i						
Project Title	Increase support programs for maternal and child health (including high risk pregnancies)						

Payment Snapshot	
Payment Available (DY2)	\$ 1,118,843.14
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,032,308.26

			3.f.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%	60% 0%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			-	-
	Patient Engagement Speed Complete	Patient Engagement Speed Complete 1.00	gement Speed Complete 1.	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	60%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	16%	0%	-	-
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	24%	0%	-	-
	Domain 3 Subtotal			7.00	100%	40%	0%	-	-
	Total Complete				100%	100%	0%	-	-

Hide Reviewer Comments

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

	Domain 1 Project Milestones - Project 3.f.i							
ΑV	/ 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	e (AV) Scorecc	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme	
Print	1			Bronx	-Lebanon Hospital Center -	Project 3.f.
						N/A
Module 3 - Patient Engage	ment Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
, , ,	a submitted with your DY2 Q1 quarterly report Q1 Actively Engaged data will be subject to re		•		•	-
	Total					1

	Domain 1 Project Prescribed Milestones - Project 3.f.i Models 1, 2 and 3									
	✓ 3.f.i Model 1 ✓ 3.f.i Model 2 ✓ 3.f.i Model 3									
Model	Model AV Project Requirement and Metric/Deliverable Due Date Due Date Status Reviewer Status AVs Award Avs									
		1. Implement an evidence-based home visitation model, such as the Nurse Family Partnership, for pregnant high- risk mothers including high-risk first time mothers.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A			
		2. Develop a referral system for early identification of women who are or may be at high-risk.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A			
3.f.i Model 1										
s.i.i wodel 1		3. Establish a quality oversight committee of OB/GYN and primary care providers to monitor quality outcomes and implement new or change activities as appropriate.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A			



	Print						,
		4. 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
		5. Identify and engage a regional medical center with expertise in management of high-risk pregnancies and infants (must have Level 3 NICU services or Regional Perinatal Center).	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		6. Develop a multidisciplinary team of experts with clinical and social support expertise who will co-manage care of the high-risk mother and infant with local community obstetricians and pediatric providers.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		7. Develop service MOUs between multidisciplinary team and OB/GYN providers.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
3.f.i Model 2		8. Utilize best evidence care guidelines for management of high risk pregnancies and newborns and implement uniform clinical protocols based upon evidence-based guidelines.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
S.I.I WOOLI Z							



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

Bronx-Lebanon Hospital Center - Project 3.f.i

Print 9. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health Pass & Ongoing 3/31/2020 3/31/2020 On hold N/A information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3. 10. Ensure that EHR systems or other IT platforms used by participating safety net providers meet Meaningful Use and 3/31/2020 3/31/2020 On hold Pass & Ongoing N/A PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. 11. Use EHRs or other IT platforms to track all patients 3/31/2020 3/31/2020 On hold Pass & Ongoing N/A engaged in this project. 12. Develop a Community meanin worker (Crivy) program on the model of the Maternal and Infant Community Health 3/31/2017 3/31/2017 Pass & Ongoing In process N/A Collaboratives (MICHC) program: access NVSDOH_funded CHW 13. Employ a Community Health Worker Coordinator responsible for supervision of 4 – 6 community health Pass & Ongoing 3/31/2017 3/31/2017 In process N/A workers. Duties and qualifications are per NYS DOH criteria. 14. Employ quaimed candidates for community nearth Workers who meet criteria such as cultural competence, 3/31/2017 3/31/2017 In process Pass & Ongoing N/A

communication and appropriate experience and training



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

Save & Netain				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ¬	•		
	Print					Bronx-	-Lebanon Hospital Center	Project 3.j.i
3.f.i Model 3								
		15. Establish protocols for deployment of	CHW.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		16. Coordinate with the Medicaid Manage organizations serving the target population		3/31/2017	3/31/2017	Not started	Pass & Ongoing	N/A
		17. Use EHRs or other IT platforms to track engaged in this project.	call patients	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.f.i (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Childhood Immunization Status (Combination 3 – 4313314)	Pass & Ongoing	1						
	Early Elective Deliveries ±	Pass & Ongoing	1						
•	Frequency of Ongoing Prenatal Care (81% or more)	Pass & Ongoing	1						



Save & Return

Print		
Lead Screening in Children	Pass & Ongoing	1
Prenatal and Postpartum Care - Postpartum Visits	Pass & Ongoing	0.5
Prenatal and Postpartum Care - Timeliness of Prenatal Care	Pass & Ongoing	0.5
Prevention Quality Indicator # 9 Low Birth Weight ±	Pass & Ongoing	1
Well Care Visits in the first 15 months (5 or more Visits)	Pass & Ongoing	1
Total		7



Print

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

Bronx-Lebanon Hospital Center - 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						

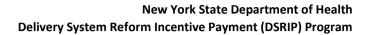
Payment Snapshot						
Payment Available (DY2)	\$	777,234.48				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	714,689.78				

	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%		-		
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	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)							
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		_
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



Save & Return

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



Print

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

Bronx-Lebanon Hospital Center - Project 4.c.ii

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

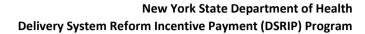
Payment Snapshot						
Payment Available (DY2)	\$	738,004.59				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	678,616.76				

4.c.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%	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	11.00	100%	40%	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	





Pass & Ongoing
Pass & Ongoing
(Black and White) of new HIV diagnoses Pass & Ongoing
(Hispanic and White) of new HIV diagnoses Pass & Ongoing
Pass & Ongoing
Pass & Ongoing
Black non-Hispanics to White non-Hispanics Pass & Ongoing
Hispanics to White non-Hispanics Pass & Ongoing



11.00

Save & Return

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

Bronx-Lebanon Hospital Center - Project 4.c.ii

Print	•	
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1

Total