

> Achievement Value (AV) Scorecard NYU Lutheran Medical Center

General Instructions									
Step	Description/Link	Image							
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	U 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							
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Like (slok on the purple fina below to access each biolokal project mport) Domain I - Organizational (All Projectic) 24 au 24 au 24 au 24 au 24 au 24 au 24 au							
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							



Print All

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

> Achievement Value (AV) Scorecard NYU Lutheran Medical Center

PPS Information					
Quarter	DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)				
PPS	NYU Lutheran Medical Center				
PPS Number	32				

	Achievement Value (AV) Scorecard Summary										
		AV [	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	Organizat	=	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.ix	20.00	20.00	0.00	20.00	\$-	\$-	\$-	\$-			
2.c.i	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	\$-	\$-	\$-	\$-			
4.b.i	14.00	14.00	0.00	14.00	\$ -	\$-	\$-	\$-			
4.c.ii	16.00	16.00	0.00	16.00	\$-	\$-	\$-	\$-			

NEW YORK STATEDepartment of HealthMedicaid Redesign Team				Delivery Syste		York State De centive Payme	-	
Print Summary Print All					Ad	chievement V NYU Luthe	alue (AV) Scor ran Medical (	
AV Adjustments (Column F)								
Total	147.00	147.00	0.00	147.00 \$	- \$	- \$	- \$	-



Print

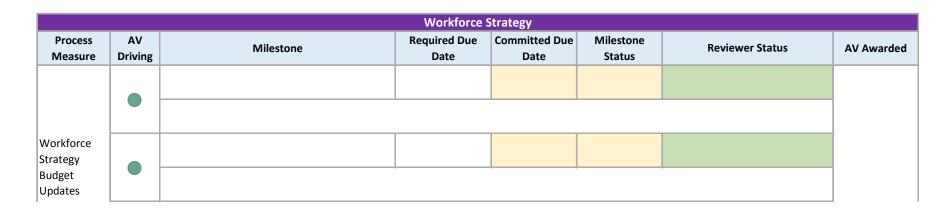
New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

## Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment NYU Lutheran Medical Center - Domain 1 Organizational AVs

Domain I Organizational Scoresheet									
Domain I Organizational	<b>Review Status</b>	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





S	ave & R		Achievem	ent Value (AV) :		Q1 April 1, 2016 - June 30, 2016 Medical Center - Domain 1 Orgo
2	Prin					
				1		-
		1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	Completed	Pass & Complete
		2. Create a workforce transition roadmap for achieving defined target workforce	6/30/2016	6/30/2016	Completed	Pass & Complete
Additional Workforce		3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	Completed	Pass & Complete
Strategy Budget						
Updates		4. Produce a compensation and benefit				
(non AV- driving)	•	analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	N/A	N/A	Completed	Pass & Complete
		5. Develop training strategy	N/A	N/A	In Process	Pass & Ongoing
				-	-	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



Sa	ave & R Prin		Achievem	ent Value (AV)		1 April 1, 2016 - June 30, 2016 Iedical Center - Domain 1 Orgo	
	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
dditional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Vorkforce trategy opic Areas		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				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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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment NYU Lutheran Medical Center - Domain 1 Organizational AVs

	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly Project						
Reports, Project	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
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 - G	overnance			
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving		Date	Date	Status		
		1. Finalize governance structure and sub-	9/30/2015	9/30/2015	Completed	Pass & Complete	
		committee structure	9/30/2013	9/30/2013	completed	rass & 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					



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

	Prin	t			NYU Lutheran I	Medical Center - Domain 1 Orgo
Updates						
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete
Update						
	•	5. Finalize community engagement plar including communications with the pub and non-provider organizations (e.g. schools, churches, homeless services,		12/31/2015	Completed	Pass & Complete
						·
		6. Finalize partnership agreements or contracts with CBOs	N/A	6/30/2016	In Process	Pass & Ongoing
Additional Governance Milestones (non AV- driving)		7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	6/30/2016	In Process	Pass & Ongoing
			•		•	5
		8. Finalize workforce communication ar	nd N/A	6/30/2016	Not Started	Pass & Ongoing

Save & Return



Sa	ave & Re	eturn	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (No NYU Lutheran Medical Center - Domain 1 Organize					
	Print				NYO Lutheran I	vieulcul Center - Domain 1 Orga	mizational Avs	
		9. Inclusion of CBOs in PPS Implementation	N/A	6/30/2016	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		
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
Additional Governance							N/A	
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	177	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
			Total				1	



Save & Return	
Print	

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment NYU Lutheran Medical Center - Domain 1 Organizational AVs

		Sec	ction 03 - Financi	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	A
Financial Stability Update		1. Finalize PPS finance structure, including reporting structure	12/31/2015	9/30/2015	Completed	Pass & Complete	
	•	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	
	•	<ol> <li>Finalize Compliance Plan consistent with New York State Social Services Law</li> <li>363-d</li> </ol>	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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New York State Department of Health **Delivery System Reform Incentive Payment (DSRIP) Program** 

NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

	Print				NYO Lutheran I	viedical Center - Domain 1 Orga
Stability 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			

	Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		1. 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		



NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

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

Section 05 - IT Systems and Processes								
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded	
Measure	Driving		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).	N/A	3/31/2016	Completed	Pass & Complete		

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Print	

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment NYU Lutheran Medical Center - Domain 1 Organizational AVs

IT Systems and processes       2. Develop an IT Change Management Strategy.       N/A       6/30/2016       Completed       Pass & Complete         3. Develop roadmap to achieving clinical data sharing and interoperable systems arcss PPS network       N/A       12/31/2015       In Process       Pass & Ongoing         4. Develop a specific plan for engaging attributed members in Qualifying Entities       N/A       3/31/2016       Not Started       Pass & Ongoing         5. Develop a data security and confidentiality plan.       N/A       12/31/2015       Completed       Pass & Complete         6       Major Risks to Implementation & Risk Mitigation Strategies       N/A       N/A       N/A       In Process       Pass & Ongoing         Additional IT Systems       Major Dependencies on Organizational       N/A       N/A       N/A       In Process       Pass & Ongoing         Additional IT Systems       Roles and Responsibilities       N/A       N/A       N/A       In Process       Pass & Ongoing	1						
Strategy.     N/A     6/30/2016     Completed     Pass & complete       IT Systems and Processes     3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network     N/A     12/31/2015     In Process     Pass & Ongoing       Image: Strategy.     4. Develop a specific plan for engaging attributed members in Qualifying Entities     N/A     3/31/2016     Not Started     Pass & Ongoing       Image: Strategy.     5. Develop a data security and confidentiality plan.     N/A     12/31/2015     Completed     Pass & Complete       Image: Strategy in the strategies     Major Risks to Implementation & Risk Mitigation Strategies     N/A     N/A     In Process     Pass & Ongoing       Additional IT Systems     Major Dependencies on Organizational T Systems     N/A     N/A     N/A     In Process     Pass & Ongoing							
and Processes       3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network       N/A       12/31/2015       In Process       Pass & Ongoing         •       4. Develop a specific plan for engaging attributed members in Qualifying Entities       N/A       3/31/2016       Not Started       Pass & Ongoing         •       5. Develop a data security and confidentiality plan.       N/A       12/31/2015       Completed       Pass & Complete         •       5. Develop a data security and confidentiality plan.       N/A       12/31/2015       Completed       Pass & Complete         •       Major Risks to Implementation & Risk Mitigation Strategies       N/A       N/A       N/A       In Process       Pass & Ongoing         •       Major Dependencies on Organizational Workstreams       N/A       N/A       N/A       In Process       Pass & Ongoing         Additional IT Systems       Roles and Responsibilities       N/A       N/A       N/A       In Process       Pass & Ongoing	-		N/A	6/30/2016	Completed	Pass & Complete	
And Processes Additional T Systems Additional T Systems A Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network N/A 12/31/2015 N/A 12/31/2016 Not Started N/A 3/31/2016 Not Started N/A 12/31/2015 Completed Pass & Ongoing N/A 12/31/2015 Completed Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete N/A N/A N/A N/A N/A N/A N/A N/A	TSuctor						
Across PPS network       -	and		N/A	12/31/2015	In Process	Pass & Ongoing	I
Additional T Systems     Aless and Responsibilities     N/A     3/31/2016     Not Started     Pass & Ongoing       N/A     3/31/2016     Not Started     Pass & Ongoing	rocesses	across PPS network					
Additional T Systems     Aless and Responsibilities     N/A     3/31/2016     Not Started     Pass & Ongoing       N/A     3/31/2016     Not Started     Pass & Ongoing	-	4. Develop a specific plan for engaging					
Confidentiality plan.       N/A       12/31/2015       Completed       Pass & Complete         Major Risks to Implementation & Risk       N/A       N/A       In Process       Pass & Ongoing         Major Dependencies on Organizational       N/A       N/A       In Process       Pass & Ongoing         Major Dependencies on Organizational       N/A       N/A       In Process       Pass & Ongoing         Additional       T Systems       Roles and Responsibilities       N/A       N/A       In Process       Pass & Ongoing			N/A	3/31/2016	Not Started	Pass & Ongoing	
Confidentiality plan.       N/A       12/31/2015       Completed       Pass & Complete         Major Risks to Implementation & Risk       N/A       N/A       In Process       Pass & Ongoing         Major Dependencies on Organizational       N/A       N/A       In Process       Pass & Ongoing         Major Dependencies on Organizational       N/A       N/A       In Process       Pass & Ongoing         Additional T Systems       Roles and Responsibilities       N/A       N/A       N/A       In Process		 E. Develop a data associto and					
Mitigation Strategies     N/A     N/A     In Process     Pass & Ongoing       Mitigation Strategies     Major Dependencies on Organizational Workstreams     N/A     N/A     In Process     Pass & Ongoing       Additional T Systems     Roles and Responsibilities     N/A     N/A     In Process     Pass & Ongoing			N/A	12/31/2015	Completed	Pass & Complete	
Mitigation Strategies     N/A     N/A     In Process     Pass & Ongoing       Mitigation Strategies     Major Dependencies on Organizational Workstreams     N/A     N/A     In Process     Pass & Ongoing       Additional T Systems     Roles and Responsibilities     N/A     N/A     N/A     In Process     Pass & Ongoing							
Additional T Systems Roles and Responsibilities N/A N/A In Process Pass & Ongoing Pass & Ongoing			N/A	N/A	In Process	Pass & Ongoing	
Workstreams     N/A     N/A     In Process     Pass & Ongoing       Additional T Systems     Roles and Responsibilities     N/A     N/A     In Process     Pass & Ongoing							
T Systems Roles and Responsibilities N/A N/A In Process Pass & Ongoing			N/A	N/A	In Process	Pass & Ongoing	
T Systems Roles and Responsibilities N/A N/A In Process Pass & Ongoing	Additional						
	T Systems	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
and Processes	Processes						٦



) Sa	ave & Re	eturn	Achievem			Q1 April 1, 2016 - June 30, 2016
	Print				NYU Lutheran I	Medical Center - Domain 1 Orga
i upic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
				•	•	
			Total			

		See	tion 06 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Establish reporting structure for PPS- wide performance reporting and communication.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
Derfermene							
Performanc e Reporting	•	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



Sa	ave & Re	eturn	Achievem	ievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (N NYU Lutheran Medical Center - Domain 1 Organi				
	Print				NYU Lutheran I	Medical Center - Domain 1 Orga	nizational A	
		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		
		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.	N/A	6/30/2016	In Process	Pass & Ongoing			



Save & Return

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

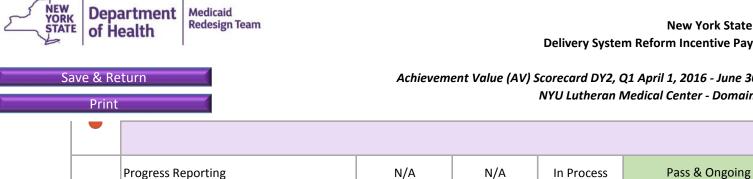
Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment

	Print				NYU Lutheran I	Medical Center - Domain 1 Orga	nizational AVs
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.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
-		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		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 Practitioner							N/A
Engagement Topic Areas		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	



		Section	08 - Population I	Health Managem	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		<ol> <li>Develop population health management roadmap.</li> </ol>	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
Population							N/A
Health		2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	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	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

0



N/A

Progress Reporting

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

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment NYU Lutheran Medical Center - Domain 1 Organizational AVs

In Process

	1	Total				0
Section 09 - Clinical Integration           Process Measure         AV Driving         Milestone         Required Due Date         Committed Due Date         Milestone Status         Reviewer Status         A           Clinical Integration <ul> <li>Perform a clinical integration 'needs assessment'.</li> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Perform a clinical integration 'needs assessment'.</li> <li>Perform a clinical integration strategy.</li> <li>N/A</li> <li>6/30/2016</li> <li>In Process</li> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Perform a Clinical Integration strategy.</li> <li>N/A</li> <li>12/31/2016</li> <li>In Process</li> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Major Risks to Implementation &amp; Risk Mitigation Strategies</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>In Process</li> <li>Pass &amp; Ongoing</li> </ul> <ul> <li>Major Dependencies on Organizational Workstreams</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>N/A</li> <li>In Process</li> <li>Pass &amp; Ongoing</li> </ul>						
		1				
	Milestone				Reviewer Status	AV Awarded
		N/A	6/30/2016	In Process	Pass & Ongoing	NI (A
						N/A
	2. Develop a Clinical Integration strategy.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
						177
		N/A	N/A	In Process	Pass & Ongoing	
Process Measure         AV Driving         Milestone         Required Due Date           I. Perform a clinical integration 'needs assessment'.         N/A           Integration         2. Develop a Clinical Integration strategy.         N/A           Major Risks to Implementation & Risk Mitigation Strategies         N/A           Major Dependencies on Organizational Workstreams         N/A           Major Dependencies on Organizational Morkstreams         N/A						
		N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
						N/A



Sa	ave & Re	eturn	Achievem			Q1 April 1, 2016 - June 30, 2016	
	Print				NYU Lutheran N	Medical Center - Domain 1 Orga	nizational AVs
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/ M
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0



Save & Return Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center AV Adjustments

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	Vs Awarded
Adjustment	Project	Projects	Available	Net	Percentage	Aujusteu AVs	Net Percentage AV	
		Selected		Awarded	AV	Avs	Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%
Project Adjustments (applied to one project only)	Various	9.00	102.00	102.00	100%	0.00	102.00	100%
Total			147.00	147.00	100%	0.00	147.00	100%

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments					
Please note that there are no AV adjustments for NYU Lutheran Medical Center in DY2, Q1					



Print
Project Snapshot
Project Domain
System Transformation Projects (Do

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.a.i

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

Payment Snapshot						
Payment Available (DY2)	\$	2,120,476.83				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	1,989,632.97				

			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%	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 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				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				



		ie (AV) Scorec	ard DY2, Q1 A	-	June 30, 2016 (Non-Paymo Lutheran Medical Center -	-
	Print					
					1	
Total						0.00
	Domain 1 Project Prescribed	Milestones - F	Project 2.a.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
•	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	9/30/2018	9/30/2018	Not Started	Pass & Ongoing	N/A
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	9/30/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Yaar (DY) 3.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
•	systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed	9/30/2018	3/31/2018	Not Started	Pass &	ኔ Ongoing



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.a.i Print 5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the Pass & Ongoing 9/30/2018 3/31/2018 Not Started N/A 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 9/30/2018 3/31/2017 Not Started Pass & Ongoing N/A 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 9/30/2018 3/31/2018 Pass & Ongoing N/A Not Started 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 9/30/2018 3/31/2018 Not Started Pass & Ongoing N/A payment arrangements. 9. Establish monthly meetings with Medicaid MCOs to discuss utilization 3/31/2017 9/30/2018 Not Started Pass & Ongoing N/A trends, performance issues, and payment reform. 10. Re-enforce the transition towards value-based payment reform by 9/30/2018 3/31/2018 Not Started Pass & Ongoing N/A aligning provider compensation to patient outcomes. 



Save & Return Achievement	alue (AV) Scored	ard DY2, Q1	-	June 30, 2016 (Non-Payme	-
Print			NYU	Lutheran Medical Center -	Project 2.a.i
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 appropria	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
		-	-		
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R i	n 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	0.333333333
	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



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 202		-
Print	YU Lutheran Medical 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



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 202		-
Print	YU Lutheran Medical 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

NI YC	Department ATE of Health	Medicaid Redesign Team	New York State Departme Delivery System Reform Incentive Payment (DSR	
	Save & Return		Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payme	
	Print		NYU Lutheran Medical Center - I	Project 2.a.i
-				
			Total	14.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.b.iii

	Project Snapshot	
Project Domain	System Transformation Projects	
Project ID	2.b.iii	
Project Title	ED care triage for at-risk populations	

Payment Snapshot						
Payment Available (DY2)	\$	1,513,229.79				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	1,419,856.07				

			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% 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	100%	40%	0%	-	-	
	Total Complete			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	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A



	Save & Return Print	Achievement Value	e (AV) Scorecc	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme utheran Medical Center - F			
-									
	Module 3 - Patient Engagem	nent Speed	Ongoing	N/A	In Process	Pass (with Exception) &	1		
	The Actively Engaged data	submitted with your DY2 O1 quarterly report	ts is under rev	iew by the IA.	and was not	Ongoing subject to remediation as u	part of this		
	,	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	/lilestones - P	roject 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
•	<ol> <li>Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.</li> <li>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.</li> <li>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.</li> </ol>	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A



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	Save & Return	Achievement Value	e (AV) Scorecc	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme	
	Print				NYU L	utheran Medical Center - F	Project 2.b.iii
•	<ul> <li>3. For patients presenting with minor primary care provider:</li> <li>a. Patient navigators will assist the preimmediate appointment with a prima medical screening examination, to val b. Patient navigator will assist the patineeded community support resources c. Patient navigator will assist the mer appointment with that provider's officient of the provider's officient with that provider's officient with that provider's officient with that provider's officient with that provider's officient of the provider's officient with that provider's officient with that provider's officient of the provider's offic</li></ul>	esenting patient to receive an ry care provider, after required idate a non-emergency need. ient with identifying and accessing 5. mber in receiving a timely	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
•	<ol> <li>Established protocols allowing ED a supervision of the ED practitioners - to disorders to alternate care sites includ appropriate level of care. (This require</li> </ol>	o transport patients with non-acute ling the PCMH to receive more	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	5. Use EHRs and other technical platf	orms to track all patients engaged	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	in the project.		. , -				
		Total					0.00

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



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	Pr	int	

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.b.iii

Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333
Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
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



Save & Return

Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 2.b.iii

Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1



	Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - NYU L NYU L	June 30, 2016 (Non-Payme utheran Medical Center - F	
•	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
	Total		14.00



Save & Return

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

 Print

 Project Snapshot

 Project Domain
 System Transformation Projects (Domain 2)

 Project ID
 2.b.ix

 Project Title
 Implementation of observational programs in hospitals

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 2.b.ix

Payment Snapshot	
Payment Available (DY2)	\$ 1,359,961.46
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,276,045.15

	2.b.ix 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.b.ix AVs Awarded: 20 out of 20

Hide Reviewer Comments

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



Save & Return       Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)         Print       NYU Lutheran Medical Center - Project 2.b.ix						
Module 3 - Patient Engageme	nt Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
,	ubmitted with your DY2 Q1 quarterly repor Actively Engaged data will be subject to re		•		•	-

	Domain 1 Project Prescribed N	/lilestones - P	roject 2.b.ix			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	<ol> <li>Create clinical and financial model to support the need for the unit.</li> </ol>	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
	3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A



	Save & Return	Achievement Value	e (AV) Scoreco	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme	-
	Print				NYUL	utheran Medical Center - P	roject 2.b.ix
•	systems with local health infor sharing health information am	et providers are actively sharing EHR rmation exchange/RHIO/SHIN-NY and nong clinical partners, including Direct alerts and patient record look up by the Y) 3.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	5. Use EHRs and other technic in the project.	cal platforms to track all patients engaged	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
Total						0.00	

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.ix (all Milestones are P4R in DY1)								
AV Driving	Measure	<b>Reviewer Status</b>	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					



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 2.b.ix

Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1



Save & Return	
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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.b.ix

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



Save & Return		Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Q				
Print	NYUL	utheran Medical Center - F	Project 2.b.ix			
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			



Save & Return Print Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.c.i

	Project Snapshot					
Project Domain	Project Domain System Transformation Projects (Domain 2)					
Project ID	2.c.i					
Project Title	To develop a community based health navigation service to assist patients to access healthcare services efficiently					

Payment Snapshot					
Payment Available (DY2)	\$	1,424,669.60			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	1,336,760.47			

	2.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%				
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.c.i AVs Awarded: 20 out of 20

Hide Reviewer Comments

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



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarte NYU Lutheran Medical Center - Project 2 Print						
Print						
						L
					Pass (with Exception) &	
Module 3 - Patient Engagem	ent Speed	Ongoing	N/A	In Process	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 Q	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 - I	Project 2.c.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
•	2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.	9/30/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	4. Resource appropriately for the community navigators, evaluating placement and service type.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.c.i

5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A		
6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A		
longitudinally.	9/30/2017	9/30/2017	Not Started	rass & Ongoing	N/A		
7. Market the availability of community-based navigation services.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A		
	-						
8. Use EHRs and other technical platforms to track all patients engaged in the project.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A		
Total 0.00							

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



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 2.c.i

Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.333333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	-	
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 2.c.i

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Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016	lune 30, 2016 (Non-Payme Lutheran Medical Center -	
Print		10,000 2.0.1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total		14.00



Print

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

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

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 3.a.i

Payment Snapshot	
Payment Available (DY2)	\$ 1,398,827.04
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,312,512.53

	3.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%						
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 Revi	Hide Reviewer Comments Total Pr				: 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	e (AV) Scoreco	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme	
	Print				NYU	Lutheran Medical Center -	Project 3.a.
-							
				-			
	Module 3 - Patient Engageme	ent 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						oart of this
	quarterly review. The DY2 Q1	Actively Engaged data will be subject to re	mediation in l	DY2 Q2 along	with the Activ	vely Engaged data reported	l in DY2 Q2.
		Total					1

		Domain 1 Project Prescribed Milestone	es - Project 3.	a.i Models 1,	2 and 3					
	✓ 3.a.i Model 1									
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
		1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A			
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A			
3.a.i Model 1										



Save	& Returi	n Achievement Va	lue (AV) Scorec	ard DY2, Q1 A	-	lune 30, 2016 (Non-Payme	-
	Print				NYUI	utheran Medical Center -	Project 3.a.i
	•	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	•	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	•	5. Co-locate primary care services at behavioral health sites	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	•	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	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.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A



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

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

	Print				NYU	utheran Medical 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.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	-	Total					0

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



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

## Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 3.a.i

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
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 201	16 - June 30, 2016 (Non-Payment Quarter)
Ν	IYU Lutheran Medical Center - Project 3.a.i

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



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

 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)

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 3.c.i

Payment Snapshot				
Payment Available (DY2)	\$	1,051,194.43		
Funding Available for Distribution DY2Q1		-		
Dollars Earned to Date (DY1)	\$	986,330.56		

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



Save & Return Print	Achievement Valu	e (AV) Scorecc	ard DY2, Q1 A	•	June 30, 2016 (Non-Payme Lutheran Medical Center -	
Module 3 - Patient Engagem	ent 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	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Not Started	Pass & Ongoing	N/A
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral	2/24/2047		Dass & Ongoing	NI (A
	health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Not Started	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 3.c.i

5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Not Started	Pass & Ongoing	N/A		
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	In Process	Pass & Ongoing	N/A		
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2018	Not Started	Pass & Ongoing	N/A		
	1					
Total						

	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			
			-			



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 20	16 - June 30, 2016 (Non-Payment Quarter)
I	NYU Lutheran Medical Center - Project 3.c.i

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) $\pm$	Pass & Ongoing	1
Total		6.00



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

\$

\$

1,088,290.68

1,004,118.83

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 Project Snapshot

 Project Domain
 Clinical Improvement Projects (Domain 3)

 Project ID
 3.d.ii

 Project Title
 Expansion of asthma home-based selfmanagement program

NYU Lutheran Medical Center - Project 3.d.ii

**Payment Snapshot** 

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

			3.d.ii 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	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 3	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		Complete	10.00	10.00	100%	100%	0%	-	-

Payment Available (DY2)

**Dollars Earned to Date (DY1)** 

Funding Available for Distribution DY2Q1

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

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 3.d.ii						
ł	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) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 3.d.ii					
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Madula 2 Datiant Frances	aant Croad				Pass (with Exception) &	
Module 3 - Patient Engager	nent speed	Ongoing	N/A	In Process	Ongoing	1
The Actively Engaged date	a submitted with your DY2 Q1 quarterly report	ts is under rev	iew by the IA,	and was not	subject to remediation as p	oart of this
quarterly review. The DY2	Q1 Actively Engaged data will be subject to rea	mediation in l	DY2 Q2 along	with the Acti	vely Engaged data reported	l in DY2 Q2.
	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
•	<ol> <li>Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions.</li> <li>Specifically, change the patient's indoor environment to reduce exposure</li> </ol>	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	<ol> <li>Develop and implement evidence-based asthma management guidelines.</li> </ol>	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	guidennes.	<u> </u>	<u> </u>			I



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	Save & Return	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Qu					
	Print				NYU L	Lutheran Medical Center - I	Project 3.d.ii
•	including basic facts about as and avoidance of environme	othma self-management education services, othma, proper medication use, identification ntal exposures that worsen asthma, self- oms and asthma control, and using written	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	5. Ensure coordinated care for and support.	or asthma patients includes social services	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	hospital visit occurs, to provi	n-up services, particularly after ED or de patients with root cause analysis of what	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	happened and how to avoid	future events.					
	7. Ensure communication, co	oordination, and continuity of care with					
	Medicaid Managed Care plar care providers, and specialty	is, Health Home care managers, primary providers.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	<ol> <li>Use EHRs or other technic this project.</li> </ol>	al platforms to track all patients engaged in	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
		Total					0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.ii (all Milestones are P4R in DY1)					
AV Driving	Measure	Reviewer Status	AVs Awarded			



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 3.d.ii

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



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

NYU Lutheran Medical Center - Project 4.b.i

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

	Payment Snapshot	
	Payment Available (DY2)	\$ 937,258.86
	Funding Available for Distribution DY2Q1	-
	Dollars Earned to Date (DY1)	\$ 879,425.38

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

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%			-	
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	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	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)							
4	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				



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
NYU Lutheran Medical Center - Project 4.b.i

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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	Save & Return Print	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - NYU	June 30, 2016 (Non-Payme Lutheran Medical Center -	
	Age-adjusted preventable hospitalizatio White non-Hispanics	ns rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1
		Total		9.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter) NYU Lutheran Medical Center - Project 4.c.ii

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

Payment Snapshot	
Payment Available (DY2)	\$ 774,478.91
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 726,689.75

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%			(1) (\$) Earn	
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	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		



	Save & Return	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 NY	5 - June 30, 2016 (Non-Payme U Lutheran Medical Center -	-
-	Print			
	Newly diagnosed HIV case rate per	100,000	Pass & Ongoing	1
•	Newly diagnosed HIV case rate per	100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Newly diagnosed HIV case rate per	100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
	Percentage of adults with health in	isurance - Aged 18- 64 years	Pass & Ongoing	1
	Percentage of premature death (be	efore age 65 years)	Pass & Ongoing	1
•	Percentage of premature death (b	efore age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Percentage of premature death (be	efore age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1



Save & Return	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 -		
Print	NYU .	Lutheran Medical Center -	Project 4.c.ii
Age-adjusted percentage of	adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable h	ospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable ho White non-Hispanics	ospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1
	Total		11 00