

Print Summary

Print All

Achievement Value (AV) Scorecard
Bassett Medical Center

PPS Information						
Quarter	DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)					
PPS	Bassett Medical Center					
PPS Number	22					

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	DY2 Q4 Payment Available	DY2 Q4 Payment Earned				
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00	Organization embedded v project's	within each				
2.a.ii	22.00	22.00	0.00	22.00	\$ 644,433	\$ 644,433				
2.b.vii	22.00	21.00	0.00	21.00	\$ 711,265	\$ 650,300				
2.b.viii	21.00	21.00	0.00	21.00	\$ 732,948	\$ 732,948				
2.c.i	22.00	22.00	0.00	22.00	\$ 667,585	\$ 667,585				
2.d.i	11.00	10.00	0.00	10.00	\$ 627,620	\$ 573,824				
3.a.i	15.00	10.50	0.00	10.50	\$ 845,731	\$ 552,978				
3.a.iv	15.00	10.50	0.00	10.50	\$ 841,479	\$ 550,198				
3.d.iii	15.00	13.00	0.00	13.00	\$ 638,514	\$ 491,164				



Print Summary	Achievement Value (AV) Scorecard Bassett Medical Center						
Print All					Bassett IVI	eaicai Center	
3.g.i	12.00	11.00	0.00	11.00	\$ 381,954	\$ 349,215	
4.a.iii	16.00	16.00	0.00	16.00	\$ 381,468	\$ 381,468	
4.b.i	14.00	14.00	0.00	14.00	\$ 438,689	\$ 438,689	
AV Adjustments (Column F)							
Total	185.00	171 00	0.00	171 00	\$6 911 685	\$6,032,801	



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Bassett Medical 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				
<u>Total</u>	Complete	5.00	5.00	0.00	5.00	100%				

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

	Workforce Strategy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
Workforce Strategy Budget Updates									



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	Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing			
Additional Workforce Strategy	Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing			
	Perform detailed gap analysis between current state assessment of workforce	N/A	N/A	In Process	Pass & Ongoing			
	and projected future state		1.47.1		, as a singening			
Budget Updates								
(non AV-	4. Produce a compensation and benefit analysis, covering impacts on both							
driving)	retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	N/A	Completed	Pass & Complete			
	partial placements							
			ı					
	5. Develop training strategy	9/30/2016	N/A	Completed	Pass & Complete			
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing			



	Prin	L					
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce Strategy Topic Areas		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
							N/A
		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	
		<u> </u>	Total				1

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



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		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing
Quarterly Project						
Reports, Project Budget and Flow of Funds	•	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete
		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing
			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	N/A	Completed	Pass & Complete		
Governance Structure		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed	Pass & Complete		



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Updates						
-		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete
Governance		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete
Update						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	N/A	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	Completed	Pass & Complete
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	N/A	Completed	Pass & Complete
urrymg)						
		8. Finalize workforce communication and engagement plan	N/A	N/A	Completed	Pass & Complete



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Bassett Medical Center - Domain 1 Organizational AVs

9. Inclusion of CBOs in PPS Pass & Complete N/A N/A Completed Implementation Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A Pass & Ongoing In Process Workstreams Roles and Responsibilities N/A N/A Pass & Ongoing In Process Additional Governance N/A Key Stakeholders N/A Topic Areas N/A Pass & Ongoing In Process IT Expectations N/A N/A Pass & Ongoing In Process Pass & Ongoing N/A N/A Progress Reporting In Process 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	N/A	Completed	Pass & Complete	
Financial Stability Update	•	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
	•	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	1
		4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	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	



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		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional inancial							
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 Compe	tency & 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	N/A	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	N/A	Completed	Pass & Complete	1



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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	
dditional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
ultural ompetency							N1/A
Health iteracy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
opic Areas							
		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 Systen	ns and Processe	S		
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving	ivillestone	Date	Date	Status	neviewer status	Av Awarded



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	•	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	N/A	Complete	Pass & Complete	
		Develop an IT Change Management Strategy.	9/30/2016	N/A	Complete	Pass & Complete	
T Systems and Processes		Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	9/30/2016	N/A	Complete	Pass & Complete	N//
		Develop a specific plan for engaging attributed members in Qualifying Entities	3/31/2017	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	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	



	Print				Bassett N	Medical Center - Domain 1 Orga	nizational AVs
Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							N/A
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
				-			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	ction 06 Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Establish reporting structure for PPS-wide performance reporting and communication.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	N/A	In Process	Pass & Ongoing	N/A



	Prin	t			Bassett N	Medical Center - Domain 1 Orga	ınizational AVs
		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 Performanc							N/A
e Reporting Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	·
			ı				
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			ı				
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	tion 07 Practitio	ner Engagement	t		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Completed	Pass & Complete	



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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	N/A	Completed	Pass & Complete	N//
		Major Risks to Implementation & Risk					
		Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational			I		
		Workstreams	N/A	N/A	In Process	Pass & Ongoing	
-					I		
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Practitioner					1		N/A
Engagement 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	

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Bassett Medical Center - Domain 1 Organizational AVs

Total 0

		Section	08 Population I	Health Managen	nent						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarde				
		Develop population health management roadmap.	3/31/2017	N/A	Complete	Pass & Complete	N/A				
Population							IN/A				
Health		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	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					



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

		!	Section 09 Clinic	al Integration					
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		1. Perform a clinical integration 'needs assessment'.	6/30/2016	N/A	Complete	Pass & Complete	N/A		
Clinical							N/A		
Integration		2. Develop a Clinical Integration strategy.	9/30/2016	N/A	Complete	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			



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	Print Bassett Medical Center - Domain 1 Organ								
Additional Clinical							N/A		
Integration 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			
			Total				0		



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center AV Adjustments

AV Adjustment Scoresheet										
	AVs Per	Total	Total AVs	Total AV	S Awarded	Adjusted	Net A	NS Awarded		
Adjustment		Projects	Available	Net	Percentage	Aujusteu AVs	Net	Downstans AV		
	Project			Awarded	AV	Avs	Awarded	Percentage AV		
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%		
Project Adjustments (applied to one project only)	Various	11.00	130.00	116.00	89%	0.00	116.00	89%		
Total			185.00	171.00	92%	0.00	171.00	92%		

Hid	e Reviewer Comments	Organizational	Project Adjustments					
	No AV Adjustments							
	Please note that there are no AV adjustments for Bassett Medical Center in DY2, Q1							



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.a.ii

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 644,433
DY2 Q4 Payment Earned	\$ 644,433

	2.a.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%			386,660	386,659.73	
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%	60%	30%			
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	386,660	386,660	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	257,773	257,773.15	
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 2 Subtotal			15.00	100%	40%	20%	257,773	257,773	
Total Complete			22.00	22.00	100%	100%	50%	644,433	644,433	

Total Project 2.a.ii AVs Awarded: 22 out of 22

Hide Reviewer Comments

	Domain 1 Project Milestones Project 2.a.ii									
AV Dri	iving	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			



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.a.ii

Print				zassett mealear center					
Enter Reviewer Comment									
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00				
Enter Revie	ewer Commen	t							
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1				
Enter Reviewer Comment									
Total									

	Domain 1 Project Prescribed Milestones Project 2.a.ii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3				_				
	PCMH accreditation and/or meet state-determined criteria for Advanced			In Process	Pass & Ongoing	N/A			
	Primary Care Models by the end of DSRIP Year 3.								
	Enter Reviewer Comment								
	2. Identify a physician champion with knowledge of PCMH/APCM	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33			
	implementation for each primary care practice included in the project.		-,,						
	Enter Reviewer Comment								
	3. Identify care coordinators at each primary care site who are								
	responsible for care connectivity, internally, as well as connectivity to	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33			
	care managers at other primary care practices.								
	Enter Revie	wer Commen	rt						



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.a.ii

4. Ensure all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure Pass & Ongoing N/A In Process messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3. Enter Reviewer Comment 5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the In Process Pass & Ongoing N/A end of Demonstration Year 3. Enter Reviewer Comment 6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all Pass & Ongoing In Process N/A participating safety net providers. **Enter Reviewer Comment** 7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease In Process Pass & Ongoing N/A management. Enter Reviewer Comment 8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all 3/31/2017 3/31/2017 Completed Pass & Complete 0.33 patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner. Enter Reviewer Comment 9. Implement open access scheduling in all primary care practices. Pass & Ongoing N/A In Process



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.a.ii

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Enter Reviewer Comment	
Total	1.00

	Domain 2 Pay for Performance and Pay for Reporting Project 2.a.ii (all Milestones are P4R	in DY2)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Enter Reviewer Comment		



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.a.ii

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



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.a.ii

Print Enter Reviewer Comment Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and Pass & Ongoing 1 able to participate in bidirectional exchange Enter Reviewer Comment 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 Pass & Ongoing 1 reimbursement Enter Reviewer Comment Potentially Avoidable Emergency Room Visits Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing Potentially Avoidable Readmissions 1 Enter Reviewer Comment PQI 90 - Composite of all measures +/-Pass & Ongoing 1 Enter Reviewer Comment Primary Care - Length of Relationship - Q3 Pass & Ongoing 0.5 Enter Reviewer Comment



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.a.ii

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Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5				
Enter Reviewer Comment						
Total						



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.b.vii

Project Snapshot						
Project Domain System Transformation Projects (Domain 2)						
Project ID 2.b.vii						
Project Title	Implementing the INTERACT project (inpatient transfer avoidance program for SNF)					

Payment Snapshot	
DY2 Q4 Payment Available	\$ 711,265
DY2 Q4 Payment Earned	\$ 650,300

	2.b.vii Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	60%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%			60%	30%	426,759	365,794
	Patient Engagement Speed	Complete	1.00	0.00	0%						
	Domain 1 Subtotal		7.00	6.00	86%	60%	30%	426,759	365,794		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	284,506	284,506		
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 2 Subtotal			15.00	100%	40%	20%	284,506	284,506		
	Total Complete		22.00	21.00	95%	100%	50%	711,265	650,300		

Total Project 2.b.vii AVs Awarded: 21 out of 22

Hide Reviewer Comments

	Domain 1 Project Milestones Project 2.b.vii								
Δ	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		



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.vii

Print Print								
Enter Reviewer Comment								
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00			
Enter Reviewer Comment								
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0			
Enter Reviewer Comment								
Total								

	Domain 1 Project Prescribed Milestones Project 2.b.vii								
AV Driving	ring Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17			
	Enter Reviewer Comment								
	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17			
	Enter Reviewer Comment								
	4. Educate all staff on care pathways and INTERACT principles.			In Process	Pass & Ongoing	N/A			



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.b.vii

Print							
Enter Reviewer Comment							
5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17		
Enter Revie	ewer Commer	nt					
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17		
Enter Revie	ewer Commen	nt					
7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17		
Enter Reviewer Comment							
8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment							
9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment							
10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17		
Enter Reviewer Comment							
Total					1.00		

Domain 2 Pay for Performance and Pay for Reporting



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.vii

AVs AV Driving Measure **Reviewer Status** Awarded Adult Access to Preventive or Ambulatory Care - 20 to 44 years Pass & Ongoing 0.3333333 Enter Reviewer Comment Adult Access to Preventive or Ambulatory Care - 45 to 64 years Pass & Ongoing 0.3333333 Enter Reviewer Comment Adult Access to Preventive or Ambulatory Care - 65 and older Pass & Ongoing 0.3333333 Enter Reviewer Comment CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers Pass & Ongoing 1 Enter Reviewer Comment Children's Access to Primary Care- 12 to 19 years Pass & Ongoing 0.25 Enter Reviewer Comment Pass & Ongoing Children's Access to Primary Care- 12 to 24 months 0.25 Enter Reviewer Comment Children's Access to Primary Care- 25 months to 6 years Pass & Ongoing 0.25 Enter Reviewer Comment



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.vii

Children's Access to Primary Care- 7 to 11 years Pass & Ongoing 0.25 Enter Reviewer Comment Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) Pass & Ongoing 0.5 Enter Reviewer Comment Helpful, Courteous, and Respectful Office Staff (Q24 and 25) Pass & Ongoing 0.5 Enter Reviewer Comment H-CAHPS - Care Transition Metrics Pass & Ongoing 1 Enter Reviewer Comment Medicaid Spending on ER and Inpatient Services ± Pass & Ongoing 1 Enter Reviewer Comment Medicaid spending on Primary Care and community based behavioral health care Pass & Ongoing 1 Enter Reviewer Comment PDI 90- Composite of all measures +/-Pass & Ongoing 1 Enter Reviewer Comment Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and Pass & Ongoing 1 able to participate in bidirectional exchange



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.vii

Print		
Enter Reviewer Comment		
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		15.00



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.b.viii

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

Payment Snapsh	ot	
DY2 Q4 Payment Available	\$	732,948
DY2 Q4 Payment Earned	\$	732,948

	2.b.viii 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	Complete	1.00	1.00	100%	60%	60%	30%	439,769	439,769
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	439,769	439,769	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	20%	293,179	293,179	
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%	20%	293,179	293,179	
	Total Complete		21.00	21.00	100%	100%	50%	732,948	732,948	

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

Hide Reviewer Comments

	Domain 1 Project Milestones Project 2.b.viii						
AV Driv	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	



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.viii

	Print						
	Enter Reviewer Comment						
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00	
	Enter Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
	Enter Reviewer Comment						
Total					2.00		

Domain 1 Project Prescribed Milestones Project 2.b.viii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
	3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.14



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.b.viii

Print Enter Reviewer Comment Pass & Complete 4. Educate all staff on care pathways and INTERACT-like principles. 3/31/2017 | 3/31/2017 | Completed 0.14 Enter Reviewer Comment 5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of 3/31/2017 | 3/31/2017 Completed Pass & Complete 0.14 life care. Enter Reviewer Comment 6. Create coaching program to facilitate and support implementation. 3/31/2017 3/31/2017 Pass & Complete Completed 0.14 Enter Reviewer Comment 7. Educate patient and family/caretakers, to facilitate participation in Pass & Complete 3/31/2017 | 3/31/2017 | Completed 0.14 planning of care. Enter Reviewer Comment 8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and Pass & Ongoing In Process N/A medication management. Enter Reviewer Comment 9. Utilize telehealth/telemedicine to enhance hospital-home care In Process Pass & Ongoing N/A collaborations. Enter Reviewer Comment



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.viii

•	10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
Total					1.00	

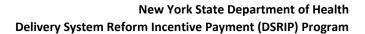
Domain 2 Pay for Performance and Pay for Reporting Project 2.b.viii (all Milestones are P4R in DY2)					
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333		
	Enter Reviewer Comment				
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333		
	Enter Reviewer Comment				
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333		
	Enter Reviewer Comment				



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.viii

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





Print	Bassett Medical Center - Pr	oject 2.b.viii
Enter Reviewer Comment		
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Enter Reviewer Comment	_	
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Enter Reviewer Comment		-
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	N/A
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Enter Reviewer Comment		



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

Save & Return

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.b.viii

Print

Potentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		14.00



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.c.i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 667,585
DY2 Q4 Payment Earned	\$ 667,585

2.c.i S				neet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%		400,551	
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%		400,551
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	400,551	400,551
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	267,034	267,034
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal		15.00	15.00	100%	40%	20%	267,034	267,034	
	Total	Complete	22.00	22.00	100%	100%	50%	667,585	667,585

Total Project 2.c.i AVs Awarded: 22 out of 22

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



Print Bassett Medical Center - Project 2.0							
	Enter Reviewer Comment						
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Complete	1.00	
	Enter Revie	ewer Commen	t				
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
	Enter Reviewer Comment						
	Total					2.00	

	Domain 1 Project Prescribed Milestones 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.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	
	Enter Reviewer Comment						
	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.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	
	Enter Reviewer Comment						
	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	
Enter Reviewer Comment							
	4. Resource appropriately for the community navigators, evaluating placement and service type.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	



Print

Print						
	Enter Reviewer Comment					
	5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
	Enter Revie	wer Commen	nt			
	6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
	Enter Reviewer Comment					
	7. Market the availability of community-based navigation services.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
	Enter Revie	wer Commen	nt			
	8. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
	Enter Reviewer Comment					
	Total					1.00

	Domain 2 Pay for Performance and Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333



Print	Bassett Medical Center -	Project 2.c.i
Enter Reviewer Comment		
Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
Enter Reviewer Comment		
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Enter Reviewer Comment		
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Enter Reviewer Comment		



Print

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



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Print						
	Enter Reviewer Comment					
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Potentially Avoidable Readmissions	Pass & Ongoing	1			
	Enter Reviewer Comment					
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5			
	Enter Reviewer Comment					
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5			
	Enter Reviewer Comment					
	Total		15.00			



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.d.i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 627,620
DY2 Q4 Payment Earned	\$ 573,824

	2.d.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%	60%	30%	376,572	322,776
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		7.00	6.00	86%	60%	30%	376,572	322,776
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	40%	20%	251,048	251,048
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal			4.00	100%	40%	20%	251,048	251,048
	Total	Complete	11.00	10.00	91%	100%	50%	627,620	573,824

Total Project 2.d.i AVs Awarded: 10 out of 11

	Domain 1 Project Milestones Project 2.d.i						
AV D	riving	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				Dassett Meanuar Conter	,
	Enter Revie	ewer Commen	t			
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Complete	1.00
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Enter Reviewer Comment						
	Total					1.00

	Domain 1 Project Prescribed Milestones Project 2.d.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
•	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	
	Enter Reviewer Comment						
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125	
	Enter Revie	wer Commen	nt .				



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 2.d.i

Print 4. Survey the targeted population about healthcare needs in the PPS' 3/31/2017 | 3/31/2017 | Completed Pass & Complete 0.125 region. Enter Reviewer Comment 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health Pass & Ongoing In Process N/A literacy, and cultural competency. Enter Reviewer Comment 6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to 3/31/2017 | 3/31/2017 Pass & Complete Completed 0.125 his/her designated PCP (see outcome measurements in #10). Enter Reviewer Comment 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards In Process Pass & Ongoing N/A improvement, must be set for each cohort at the beginning of each performance period. Enter Reviewer Comment 8. Include beneficiaries in development team to promote preventive Pass & Complete 3/31/2017 | 3/31/2017 Completed 0.125 care. Enter Reviewer Comment 9. Measure PAM® components Pass & Ongoing N/A In Process Enter Reviewer Comment 10. Increase the volume of non-emergent (primary, behavioral, dental) In Process Pass & Ongoing N/A care provided to UI, NU, and LU persons.



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.d.i

Print Enter Reviewer Comment 11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, Pass & Ongoing N/A In Process community healthcare resources (including for primary and preventive services) and patient education. Enter Reviewer Comment 12. Develop a process for Medicaid recipients and project participants to 3/31/2017 3/31/2017 Pass & Complete Completed 0.125 report complaints and receive customer service. Enter Reviewer Comment 13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the 3/31/2017 | 3/31/2017 Completed Pass & Complete 0.125 PAM®. **Enter Reviewer Comment** 14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community In Process Pass & Ongoing N/A events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services and Enter Reviewer Comment 15. Inform and educate navigators about insurance options and Pass & Ongoing N/A In Process healthcare resources available to UI, NU, and LU populations. Enter Reviewer Comment 16. Ensure appropriate and timely access for navigators when attempting Pass & Ongoing In Process N/A to establish primary and preventive services for a community member. Enter Reviewer Comment



Print

	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
	Enter Reviewer Comment					
Total					1.00	

	Domain 2 Pay for Performance and Pay for Reporting Project 2.d.i (all Milestones are P4R in DY2)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	ED use by uninsured	Pass & Ongoing	1				
	Enter Reviewer Comment						



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

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 2.d.i

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PAM Level	Pass & Ongoing	1			
Enter Reviewer Comment					
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1			
Enter Reviewer Comment					
Total		4.00			



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical 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	
DY2 Q4 Payment Available	\$ 845,731
DY2 Q4 Payment Earned	\$ 552,978

			3.a.i Scores	neet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			390,337	
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%	60%	30%		390,337
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	390,337	390,337
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	4.9%	65,056	65,056
Domain 3	Domain 3 Pay for Performance	Complete	6.00	1.50	25%	30.1%	30.1%	390,337	97,584
	Domain 3 Subtotal			3.50	44%	40%	35%	455,394	162,641
Total Complete			15.00	10.50	70%	100%	65%	845,731	552,978

Total Project 3.a.i AVs Awarded: 10.5 out of 15

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



Print				Bassett Wealcal Center -	Project 3.a.i		
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00		
Enter Revie	ewer Commen	t					
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total					2		

	Domain 1 Project Prescribed Milestones Project 3.a.i Models 1, 2 and 3										
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3										
Model	AV Driving	Project Requirement and Metric/Deliverable	Project Requirement and Metric/Deliverable Required Due Date Due Date Status Reviewer Status Awar								
	•	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.			In Process	Pass & Ongoing	N/A				
		Enter Reviewer Comment									
		Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125				
3.a.i Model 1		Ent	ter Reviewer	Comment							



	Print					Bassett 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.			In Process	Pass & Ongoing	N/A		
		En	ter Reviewer	Comment					
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		En	ter Reviewer	Comment					
	•	5. Co-locate primary care services at behavioral health sites.			In Process	Pass & Ongoing	N/A		
		Enter Reviewer Comment							
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
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.			In Process	Pass & Ongoing	N/A		
		Enter Reviewer Comment							
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
		9. Implement IMPACT Model at Primary Care Sites.			In Process	Pass & Ongoing	N/A		



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		Enter Reviewer Comment							
	•	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	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
		13. Measure outcomes as required in the IMPACT Model.			In Process	Pass & Ongoing	N/A		
		Enter Reviewer Comment							
		14. Provide "stepped care" as required by the IMPACT Model.			In Process	Pass & Ongoing	N/A		
		En	ter Reviewer	er Reviewer Comment					
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
		Total					1		



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 3.a.i

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AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
	P4P Measure DY2Q4		
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	P4P Measure DY2Q4		
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	P4P Measure DY2Q4		
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	P4P Measure DY2Q4		
	Diabetes Monitoring for People with Diabetes and Schizophrenia	N/A	N/A
	P4P Measure DY2Q4		
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
	P4P Measure DY2Q4		
	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
	P4P Measure DY2Q4		



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Bassett Medical Center - Project 3.a.i

Print

Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0					
P4P Measure DY2Q4							
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5					
P4R Measure DY2Q4	P4R Measure DY2Q4						
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5					
P4R Measure DY2Q4							
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5					
P4P Measure DY2Q4							
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0					
P4P Measure DY2Q4							
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1					
P4P Measure DY2Q4							
Screening for Clinical Depression and follow-up	Pass & Ongoing	1					
P4R Measure DY2Q4							
Total		3.5					



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 3.a.iv

	Project Snapshot						
Project Domain Clinical Improvement Projects (Domain 3)							
Project ID 3.a.iv							
	Development of Withdrawal Management (e.g.,						
Project Title	ambulatory detoxification, ancillary withdrawal						
	services) capabilities and appropriate enhanced						

Payment Snapshot	
DY2 Q4 Payment Available	\$ 841,479
DY2 Q4 Payment Earned	\$ 550,198

	3.a.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	388,375	388,375
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	388,375	388,375
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	4.9%	64,729	64,729
Domain 3	Domain 3 Pay for Performance (P4P)		6.00	1.50	25%	30.1%	30.1%	388,375	97,094
Domain 2 Subtotal			8.00	3.50	44%	40%	35%	453,104	161,823
	Total	Complete	15.00	10.50	70%	100%	65%	841,479	550,198

Total Project 3.a.iv AVs Awarded: 10.5 out of 15

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



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	Enter Reviewer Comment						
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00	
	Enter Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
	Enter Reviewer Comment						
	Total						

	Domain 1 Project Prescribed Milestones Project 3.a.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment								
	2. Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
•	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33		



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	Enter Reviewer Comment								
•	4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.			In Process	Pass & Ongoing	N/A			
	Enter Revie	wer Commen	nt						
	5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33			
	Enter Reviewer Comment								
	6. Develop care management services within the SUD treatment program.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33			
	Enter Reviewer Comment								
Total									

	Domain 3 Pay for Performance and Pay for Reporting	
AV Driving Meas ure	Reviewer Status	AVs
	Neviewei Status	Awarded



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 3.a.iv

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	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0			
	P4P Measure DY2Q4					
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0			
	P4P Measure DY2Q4					
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0			
	P4P Measure DY2Q4					
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A			
	P4P Measure DY2Q4					
	Diabetes Monitoring for People with Diabetes and Schizophrenia	N/A	N/A			
	P4P Measure DY2Q4					
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0			
	P4P Measure DY2Q4					
	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0			
	P4P Measure DY2Q4					
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0			
_						



Print		-
P4P Measure DY2Q4		
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
P4R Measure DY2Q4		
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
P4R Measure DY2Q4		
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
P4P Measure DY2Q4		
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
P4P Measure DY2Q4		
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
P4P Measure DY2Q4		
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
P4R Measure DY2Q4		
Total		3.5



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 3.d.iii

	Project Snapshot						
Project Domain	Clinical Improvement Projects (Domain 3)						
Project ID	3.d.iii						
Project Title	Implementation of evidence-based medicine guidelines for asthma management						

Payment Snapshot	
DY2 Q4 Payment Available	\$ 638,514
DY2 Q4 Payment Earned	\$ 491,164

	3.d.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%	294,699	294,699	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	294,699	294,699	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	9.9%	4.9%	49,116	49,116	
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	4.00	2.00	50%	30.1%	30.1%	294,699	147,349	
	Domain 2 Subtotal			6.00	75%	40%	35%	343,815	196,466	
Total Complete		15.00	13.00	87%	100%	65%	638,514	491,164		

Total Project 3.d.iii AVs Awarded: 13 out of 15

	Domain 1 Project Milestones Project 3.d.iii								
AV Drivin	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			



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Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00		
Enter Revie	ewer Commen	t					
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total							

	Domain 1 Project Prescribed Milestones Project 3.d.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.50		
	Enter Reviewer Comment							



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	4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.50	
	Enter Reviewer Comment						
Total						1.00	

Domain 3 Pay for Performance and Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1			
	P4P Measure DY2Q4					
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Fail	0			
	P4P Measure DY2Q4					
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Fail	0			
	P4P Measure DY2Q4					
	Pediatric Quality Indicator #14 Pediatric Asthma ±	Pass & Ongoing	1			
	P4P Measure DY2Q4					
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Fail	0			



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

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)	Print		
	P4P Measure DY2Q4		
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
	P4R Measure DY2Q4		



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 3.g.i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 381,954
DY2 Q4 Payment Earned	\$ 349,215

	3.g.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%	229,172	196,433	
	Patient Engagement Speed	Complete	1.00	0.00	0%					
	Domain 1 Subtotal		7.00	6.00	86%	60%	30%	229,172	196,433	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	40.0%	35%	152,781	152,781	
Domain 5	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	40.070	+0.0% 33%	132,761	132,761	
	Domain 2 Subtotal			5.00	100%	40%	35%	152,781	152,781	
	Total	Complete	12.00	11.00	92%	100%	65%	381,954	349,215	

Total Project 3.g.i AVs Awarded: 11 out of 12

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



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Enter Reviewer Comment					
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00
Enter Revie	ewer Commen	t			
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Enter Reviewer Comment					
Total					1.00

	Domain 1 Project Prescribed Milestones Project 3.g.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.			In Process	Pass & Ongoing	N/A		
	Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25		
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25		
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25		



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	5. Engage with Medicaid Managed Care to address coverage of services.			In Process	Pass & Ongoing	N/A
	6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25
Total						1.00

	Domain 3 Pay for Performance and Pay for Reporting Project 3.g.i (all Milestones are P4R in DY2)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of members who remained stable or demonstrated improvement in pain	Pass & Ongoing	1				
	Advanced Directives – Talked about Appointing for Health Decisions	Pass & Ongoing	1				
	Percentage of members whose pain was not controlled ±	Pass & Ongoing	1				
	Depressive feelings - percentage of members who experienced some depression feeling ±	Pass & Ongoing	1				
	Percentage of members who had severe or more intense daily pain ±	Pass & Ongoing	1				



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 3.g.i

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Total 5.00



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett 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	
DY2 Q4 Payment Available	\$ 438,689
DY2 Q4 Payment Earned	\$ 438,689

				heet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	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%		30%	263,213	263,213			
	Patient Engagement Speed	N/A	0.00	0.00	0%							
	Domain 1 Subtotal		5.00	5.00	100%	60%	30%	263,213	263,213			
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	40%	20%	175,476	175,476			
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-			
Domain 4 Subtotal			9.00	9.00	100%	40%	20%	175,476	175,476			
	Total	Complete	14.00	14.00	100%	100%	50%	438,689	438,689			

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

	Domain 4 Pay for Performance and Pay for Reporting Project 4.b.i (all Milestones are P4R in DY2)					
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	Bassett Medical Center - I	Project 4.b.i
Enter Reviewer Comment		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of cigarette smoking among adults	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		



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

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



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 4.a.iii

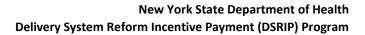
	Project Snapshot
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.a.iii
Project Title	Strengthen Mental Health and Substance Abuse Infrastructure Across Systems

Payment Snapshot	
DY2 Q4 Payment Available	\$ 381,468
DY2 Q4 Payment Earned	\$ 381,468

			4.a.iii Scores	heet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	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%		30%	228,881	228,881			
	Patient Engagement Speed	N/A	0.00	0.00	0%							
	Domain 1 Subtotal		5.00	5.00	100%	60%	30%	228,881	228,881			
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	40%	20%	152,587	152,587			
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%	20%	152,587	152,587			
	Total	Complete	16.00	16.00	100%	100%	50%	381,468	381,468			

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

	in DY2)		
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	Bassett Medical Center - P	roject 4.a.iii
Enter Reviewer Comment		
Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		



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

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Bassett Medical Center - Project 4.a.iii

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