

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

**Print Summary** 

Print All

Achievement Value (AV) Scorecard Finger Lakes Performing Provider Systems, Inc.

| PPS Information |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|
| Quarter         | DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) |  |  |  |  |  |  |
| PPS             | Finger Lakes Performing Provider Systems, Inc.             |  |  |  |  |  |  |
| PPS Number      | 9  |  |  |  |  |  |  |

| A  | Achievement V | alue (AV) Sco | recard Summa     | ary                |   |                          |  |
|--|---------------|---------------|------------------|--------------------|---|--------------------------|--|
| Project Link (click on the purple link below to access |               | AV [          | Data             |                    | Payment Data  |                          |  |
| each individual project report)                        | AVs Available | AVs Awarded   | AV<br>Adjustment | Net AVs<br>Awarded | DY2 Q4 Payment<br>Available                                     | DY2 Q4 Payment<br>Earned |  |
| Domain I Organizational (All Projects)                 | 5.00          | 5.00          | 0.00             | 5.00               | Organizational funds are embedded within each project's payment |                          |  |
| 2.a.i  | 21.00         | 21.00         | 0.00             | 21.00              | \$ 7,115,040  | \$ 7,115,040             |  |
| 2.b.iii  | 22.00         | 22.00         | 0.00             | 22.00              | \$ 5,227,224  | \$ 5,227,224             |  |
| 2.b.iv   | 22.00         | 22.00         | 0.00             | 22.00              | \$ 4,969,722  | \$ 4,969,722             |  |
| 2.b.vi   | 22.00         | 22.00         | 0.00             | 22.00              | \$ 5,971,552  | \$ 5,971,552             |  |
| 2.d.i  | 11.00         | 11.00         | 0.00             | 11.00              | \$ 4,381,864  | \$ 4,381,864             |  |
| 3.a.i  | 17.00         | 10.00         | 0.00             | 10.00              | \$ 6,019,132  | \$ 3,538,720             |  |
| 3.a.ii   | 17.00         | 10.00         | 0.00             | 10.00              | \$ 5,667,282  | \$ 3,331,864             |  |
| 3.a.v  | 11.00         | 9.93          | 0.00             | 9.93               | \$ 6,606,823  | \$ 5,051,056             |  |
| 3.f.i  | 13.00         | 13.00         | 0.00             | 13.00              | \$ 5,285,459  | \$ 5,285,459             |  |



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| 4.a.iii                   | 16.00  | 16.00  | 0.00 | 16.00  | \$<br>2,541,086  | \$<br>2,541,086  |
|---------------------------|--------|--------|------|--------|------------------|------------------|
| 4.b.ii                    | 21.00  | 21.00  | 0.00 | 21.00  | \$<br>2,159,923  | \$<br>2,159,923  |
| AV Adjustments (Column F) |        |        |      |        |                  |                  |
| Total                     | 193.00 | 177.93 | 0.00 | 177.93 | \$<br>55,945,107 | \$<br>49,573,510 |





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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Finger Lakes Performing Provider Systems, Inc. - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

### **Hide Reviewer Comments**

|  | Workforce Strategy |  |                      |                       |                     |                 |           |  |  |  |  |
|--|--------------------|--|----------------------|-----------------------|---------------------|-----------------|-----------|--|--|--|--|
| Process<br>Measure                         | AV<br>Driving      | Milestone                              | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarde |  |  |  |  |
|  | •                  |  |                      |                       |                     |                 |           |  |  |  |  |
| Workforce<br>Strategy<br>Budget<br>Updates | •                  | Workforce Strategy Spending (Baseline) | Ongoing              | N/A                   | Completed           | Pass & Complete |           |  |  |  |  |



| Additional<br>Workforce<br>Strategy<br>Budget<br>Updates<br>(non AV-<br>driving) |   | Define target workforce state (in line with DSRIP program's goals)  | N/A        | N/A | In Process | Pass & Ongoing  |
|--|---|---|------------|-----|------------|-----------------|
|  |   |   |            |     | _          |                 |
|  |   | Create a workforce transition roadmap for achieving defined target workforce  | N/A        | N/A | In Process | Pass & Ongoing  |
|  |   |   |            |     |            |                 |
|  | • | 3. Perform detailed gap analysis between current state assessment of workforce and projected future state   | N/A        | N/A | In Process | Pass & Ongoing  |
|  |   |   |            |     |            |                 |
|  | • | 4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements | 6/30/2016  | N/A | Completed  | Pass & Complete |
|  |   | partial procenients   |            | ı   |            |                 |
|  |   | 5. Develop training strategy  | 12/31/2016 | N/A | Completed  | Pass & Complete |
|  |   |   |            |     |            |                 |
|  |   | Major Risks to Implementation & Risk Mitigation Strategies  | N/A        | N/A | In Process | Pass & Ongoing  |



|                                      | Prin | t   | Fi    | inger Lakes Perf | forming Provider | Systems, Inc Domain 1 Orga | ınizational A |
|--------------------------------------|------|---|-------|------------------|------------------|----------------------------|---------------|
|                                      | •    | Major Dependencies on Organizational<br>Workstreams | N/A   | N/A              | In Process       | Pass & Ongoing             |               |
| Additional                           | •    | Roles and Responsibilities                          | N/A   | N/A              | In Process       | Pass & Ongoing             |               |
| Workforce<br>Strategy<br>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 |                  |                  |                            | 1             |

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



|  | Print |  | F           | inger Lakes Perf | orming Providei | r Systems, Inc.  - Domain 1 Orgo |
|--|-------|--|-------------|------------------|-----------------|----------------------------------|
| Quarterly<br>Project<br>Reports,<br>Project<br>Budget and<br>Flow of |       |  |             |                  |                 |                                  |
|  |       | Module 1.2 - PPS Budget Report (Quarte   | rly Ongoing | N/A              | In Process      | Pass & Ongoing                   |
|  |       |  |             |                  |                 |                                  |
|  | •     | Module 1.3 - PPS Flow of Funds (Baseline | e) Ongoing  | N/A              | Completed       | Pass & Complete                  |
|  |       |  |             |                  |                 |                                  |
| Funds  |       | Module 1.4 - PPS Flow of Funds (Quarter  | ly) Ongoing | N/A              | In Process      | Pass & Ongoing                   |
|  |       |  |             |                  |                 |                                  |
|  |       | Quarterly Progress Reports               | N/A         | N/A              | In Process      | Pass & Ongoing                   |
|  |       |  | ·           |                  |                 |                                  |
|  |       |  | Total       |                  |                 |                                  |

|                    | Section 02 Governance |   |                      |                       |                     |                 |            |  |  |  |  |
|--------------------|-----------------------|---|----------------------|-----------------------|---------------------|-----------------|------------|--|--|--|--|
| Process<br>Measure | AV<br>Driving         | Milestone   | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |  |  |  |  |
|                    |                       | 1. Finalize governance structure and subcommittee structure | 9/30/2015            | N/A                   | Completed           | Pass & Complete |            |  |  |  |  |
|                    |                       |   |                      |                       |                     |                 |            |  |  |  |  |
|                    |                       | 2. Establish a clinical governance                          |                      |                       |                     |                 |            |  |  |  |  |
| Governance         |                       | structure, including clinical quality                       | 12/31/2015           | N/A                   | Completed           | Pass & Complete |            |  |  |  |  |
| Structure          |                       | committees for each DSRIP project                           |                      |                       |                     |                 |            |  |  |  |  |



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| Updates                                 |       |  |            |     |           |                 |
|---|-------|--|------------|-----|-----------|-----------------|
|   |       | Finalize bylaws and policies or     Committee Guidelines where applicable  | 9/30/2015  | N/A | Completed | Pass & Complete |
|   |       |  |            |     |           |                 |
| Governance<br>Process                   | ocess | 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 |
| u                                       |       |  |            |     |           |                 |
|   |       | 8. Finalize workforce communication and engagement plan  | N/A        | N/A | Completed | Pass & Complete |
|   |       |  |            |     |           |                 |



Print

|                          | 9. Inclusion of CBOs in PPS Implementation                 | N/A   | 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  |      |
|                          |  |       |     |            |                 |      |
|                          | Roles and Responsibilities                                 | N/A   | N/A | In Process | Pass & Ongoing  |      |
| Additional<br>Governance |  |       |     |            |                 | N/A  |
| Topic Areas              | Key Stakeholders   | N/A   | N/A | In Process | Pass & Ongoing  | IN/A |
|                          |  |       |     |            |                 |      |
|                          | IT Expectations  | N/A   | N/A | In Process | Pass & Ongoing  |      |
|                          |  |       |     |            |                 |      |
|                          | Progress Reporting   | N/A   | N/A | In Process | Pass & Ongoing  |      |
|                          |  |       |     |            |                 |      |
|                          |  | Total |     |            |                 | 1    |



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| Process<br>Measure  | AV<br>Driving | Milestone   | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|---------------------|---------------|---|----------------------|-----------------------|---------------------|-----------------|------------|
|                     |               | 1. Finalize PPS finance structure, including reporting structure  | 12/31/2015           | N/A                   | Completed           | Pass & Complete |            |
|                     |               |   |                      |                       |                     |                 |            |
|                     | •             | 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 |            |
| Financial           |               |   |                      |                       |                     |                 |            |
| Stability<br>Update |               | 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<br>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  |            |
|                     |               |   |                      |                       |                     |                 |            |



|                          | FIIII |                            |     |     |            |                |       |  |
|--------------------------|-------|----------------------------|-----|-----|------------|----------------|-------|--|
|                          |       | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing |       |  |
| Additional<br>Financial  |       |                            |     |     |            |                | N/A   |  |
| Stability<br>Topic Areas |       | Key Stakeholders           | N/A | N/A | In Process | Pass & Ongoing | IN/ F |  |
|                          |       |                            |     |     |            |                |       |  |
|                          |       | IT Expectations            | N/A | N/A | In Process | Pass & Ongoing |       |  |
|                          |       |                            |     |     |            |                |       |  |
|                          |       | Progress Reporting         | N/A | N/A | In Process | Pass & Ongoing |       |  |
|                          |       |                            |     |     |            |                |       |  |
|                          | Total |                            |     |     |            |                |       |  |

|   |               | Section 04   | <b>Cultural Compe</b> | tency & Health        | Literacy            |                 |            |
|---|---------------|--|-----------------------|-----------------------|---------------------|-----------------|------------|
| Process<br>Measure                            | AV<br>Driving | Milestone  | Required Due<br>Date  | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|   |               | Finalize cultural competency / health literacy strategy.   | 12/31/2015            | N/A                   | Completed           | Pass & Complete |            |
| Cultural<br>Competency<br>/Health<br>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          |



|                        | 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 |       |
|                        |  |       |     |            |                |       |
| Additional             | Roles and Responsibilities                                 | N/A   | N/A | In Process | Pass & Ongoing |       |
| cultural<br>competency |  |       |     |            |                | N/A   |
| Health<br>iteracy      | Key Stakeholders   | N/A   | N/A | In Process | Pass & Ongoing | 14,77 |
| opic Areas             |  |       |     |            |                |       |
|                        | IT Expectations  | N/A   | N/A | In Process | Pass & Ongoing |       |
| -                      |  |       |     |            |                |       |
|                        | Progress Reporting   | N/A   | N/A | In Process | Pass & Ongoing |       |
|                        |  |       |     |            |                |       |
|                        |  | Total |     |            |                | 1     |

|     | Section 05 IT Systems and Processes |         |             |              |                      |           |                 |            |
|-----|-------------------------------------|---------|-------------|--------------|----------------------|-----------|-----------------|------------|
| Pro | ocess                               | AV      | Milestone   | Required Due | <b>Committed Due</b> | Milestone | Reviewer Status | AV Awarded |
| Me  | easure                              | Driving | Willestoffe | Date         | Date                 | Status    | Reviewer Status | AV Awarueu |



|                               | • | 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.  | 6/30/2016 | N/A | Complete   | Pass & Complete |     |
| J. T. C. J.                   |   |  |           |     |            | '               |     |
| T Systems<br>and<br>Processes |   | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network   | N/A       | N/A | In Process | Pass & Ongoing  | N/A |
|                               |   |  |           |     |            |                 |     |
|                               |   | 4. Develop a specific plan for engaging attributed members in Qualifying Entities  | N/A       | N/A | In Process | Pass & Ongoing  |     |
|                               |   |  |           |     |            |                 |     |
|                               |   | 5. Develop a data security and confidentiality plan.   | 9/30/2016 | 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  |     |



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|--------------------------|-------|----------------------------|-------|-----------------|------------------|---------------------------|--------------|
| Additional               |       |                            |       |                 |                  |                           |              |
| T Systems<br>and         |       | Roles and Responsibilities | N/A   | N/A             | In Process       | Pass & Ongoing            | N/A          |
| Processes<br>Fopic 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<br>Measure        | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|                           |               | Establish reporting structure for PPS-wide performance reporting and communication.  | N/A                  | N/A                   | In Process          | Pass & Ongoing  | N/A        |
| Performanc<br>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        |



|                        | Major Risks to Implementation & Risk             | N/A   | N/A | In Process | Pass & Ongoing |     |
|------------------------|--|-------|-----|------------|----------------|-----|
|                        | Mitigation Strategies                            |       |     |            |                |     |
|                        | 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<br>erformanc |  |       |     |            |                | N/A |
| Reporting opic Areas   | Key Stakeholders                                 | N/A   | N/A | In Process | Pass & Ongoing | ,   |
|                        |  | ı     | I   |            |                |     |
|                        | IT Expectations                                  | N/A   | N/A | In Process | Pass & Ongoing |     |
|                        |  | ı     | I   |            |                |     |
|                        | Progress Reporting                               | N/A   | N/A | In Process | Pass & Ongoing |     |
|                        |  |       |     |            |                |     |
|                        |  | Total |     |            |                | 0   |

|         | Section 07 Practitioner Engagement |   |              |               |            |                 |            |  |  |  |
|---------|------------------------------------|---|--------------|---------------|------------|-----------------|------------|--|--|--|
| Process | AV                                 | Milestone   | Required Due | Committed Due | Milestone  | Reviewer Status | AV Awarded |  |  |  |
| Measure | Driving                            | willestone  | Date         | Date          | Status     |                 | AV Awarded |  |  |  |
|         |                                    | 1. Develop Practitioners communication and engagement plan. | N/A          | N/A           | In Process | Pass & Ongoing  |            |  |  |  |



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| Practitioner<br>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 | 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 |     |
| Additional                 | • | Roles and Responsibilities   | N/A | N/A | In Process | Pass & Ongoing |     |
| ractitioner<br>ingagement  |   |  |     |     |            |                | N/A |
| opic Areas                 |   | Key Stakeholders   | N/A | N/A | In Process | Pass & Ongoing |     |
|                            |   | IT Expectations  | N/A | N/A | In Process | Pass & Ongoing |     |
|                            |   |  |     |     |            |                |     |
|                            |   | Progress Reporting   | N/A | N/A | In Process | Pass & Ongoing |     |



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Finger Lakes Performing Provider Systems, Inc. - Domain 1 Organizational AVs

Total 0

| Section 08 Population Health Management |               |  |                      |                       |                     |                 |            |  |
|---|---------------|--|----------------------|-----------------------|---------------------|-----------------|------------|--|
| Process<br>Measure                      | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |  |
|   |               | Develop population health management roadmap.              | N/A                  | N/A                   | In Process          | Pass & Ongoing  | N/A        |  |
| Population                              |               |  |                      |                       |                     |                 | NA         |  |
| 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<br>Population                |               |  |                      |                       |                     |                 | N/A        |  |
| Health Topic<br>Areas                   |               | Key Stakeholders   | N/A                  | N/A                   | In Process          | Pass & Ongoing  | ,          |  |
|   |               |  |                      |                       |                     |                 |            |  |



|  | Print |                    |       | nger Lukes Ferj | orning Frovider | Systems, mc Domain 1 Orga |
|--|-------|--------------------|-------|-----------------|-----------------|---------------------------|
|  |       | 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<br>Measure | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|                    |               | <ol> <li>Perform a clinical integration 'needs assessment'.</li> </ol> | 12/31/2016           | N/A                   | Complete            | Pass & Complete | N/A        |
| Clinical           |               |  |                      |                       |                     |                 | N/A        |
| Integration        |               | 2. Develop a Clinical Integration strategy.                            | 3/31/2017            | N/A                   | Complete            | Pass & Complete | N/A        |
|                    |               |  |                      |                       |                     |                 | 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  |            |



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

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|  | Print |                    | .,    | nger Lukes renj | ommig i rovidei | Systems, me Domain 1 Orga | mzacion |
|--|-------|--------------------|-------|-----------------|-----------------|---------------------------|---------|
| Additional<br>Clinical<br>Integration<br>Topic Areas |       |                    |       |                 |                 |                           | 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            |         |
|  |       |                    |       |                 |                 |                           |         |
|  |       |                    | Total |                 |                 |                           | 0       |



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

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| AV Adjustment Scoresheet                             |         |          |           |           |            |                 |         |               |
|--|---------|----------|-----------|-----------|------------|-----------------|---------|---------------|
|  | AVs Per | Total    | Total AVs | Total AVs | Awarded    | Adjusted        | Net A   | NVs Awarded   |
| Adjustment   | Project | Projects | Available | Net       | Percentage | Aujusteu<br>AVs | Net     | Percentage AV |
|  | Project | Selected | Available | Awarded   | AV         | AVS             | Awarded |               |
| 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    | 138.00    | 122.93    | 89%        | 0.00            | 122.93  | 89%           |
| Total  |         |          | 193.00    | 177.93    | 92%        | 0.00            | 177.93  | 92%           |

| Hid | e Reviewer Comments  | Organizational | Project Adjustments |  |  |  |  |
|-----|--|----------------|---------------------|--|--|--|--|
|     | No AV Adjustments  |                |                     |  |  |  |  |
|     | Please note that there are no AV adjustments for Finger Lakes Performing Provider Systems, Inc. in DY2, Q1 |                |                     |  |  |  |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.a.i

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

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>7,115,040 |
| DY2 Q4 Payment Earned    | \$<br>7,115,040 |

|                   |                                    |               | 2.a.i Scores     | heet               |                  |                              |                                  |                              |                               |  |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|
| Domain            | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |
|                   | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |
| Domain 1          | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 4,269,024                    | 4,269,024.30                  |  |
|                   | Patient Engagement Speed           | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |  |
|                   | Domain 1 Subtotal                  |               | 6.00             | 6.00               | 100%             | 60%                          | 30%                              | 4,269,024                    | 4,269,024                     |  |
| Domain 2          | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 2,846,016                    | 2,846,016.20                  |  |
| 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%                              | 2,846,016                    | 2,846,016                     |  |
|                   | Total                              | Complete      | 21.00            | 21.00              | 100%             | 100%                         | 50%                              | 7,115,040                    | 7,115,040                     |  |

Total Project 2.a.i AVs Awarded: 21 out of 21

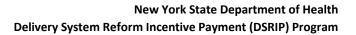
### Hide Reviewer Comments

|            | Domain 1 Project Milestones Project 2.a.i                          |                      |                       |                     |                 |                |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable                         | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |
|            | Module 1 - Major risks to implementation and mitigation strategies | Ongoing              | N/A                   |                     | Pass & Ongoing  | N/A            |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |



| Module 2 - Project Implementation Speed | Ongoing    | N/A | In Process | Pass & Ongoing | 1.00 |
|---|------------|-----|------------|----------------|------|
| Enter Revie                             | wer Commen | t   |            |                |      |
| Total                                   |            |     |            |                | 1.00 |

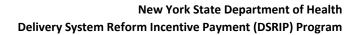
|            | Domain 1 Project Prescribed N  | lilestones P         | roject 2.a.i          |                     |                 |                |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>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. |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |
|            | Enter Revie  | wer Commer           | nt                    |                     |                 |                |  |  |
|            | 2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.  | 3/31/2017            | 3/31/2017             | In Process          | Pass & Complete | 0.33           |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
|            | 3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.   | 3/31/2017            | 3/31/2017             | In Process          | Pass & Complete | 0.33           |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
| •          | 4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.                           |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |





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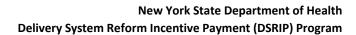
| Enter Revie   | wer Commen | t         |                           |                 |      |  |  |
|---|------------|-----------|---------------------------|-----------------|------|--|--|
| 5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  |            |           | In Process                | Pass & Ongoing  | N/A  |  |  |
| Enter Revie   | wer Commen | t         |                           |                 |      |  |  |
| 6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  |            |           | In Process                | Pass & Ongoing  | N/A  |  |  |
| Enter Revie   | wer Commen | t         |                           |                 |      |  |  |
| 7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3. |            |           | In Process                | Pass & Ongoing  | N/A  |  |  |
| Enter Revie   | wer Commen | t         | In Process Pass & Ongoing |                 |      |  |  |
| 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  |            |           | In Process                | Pass & Ongoing  | N/A  |  |  |
| Enter Revie   | wer Commen | t         |                           |                 |      |  |  |
| 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.   | 3/31/2017  | 3/31/2017 | In Process                | Pass & Complete | 0.33 |  |  |
| Enter Reviewer Comment  |            |           |                           |                 |      |  |  |
| 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.   |            |           | In Process                | Pass & Ongoing  | N/A  |  |  |
| Enter Reviewer Comment  |            |           |                           |                 |      |  |  |





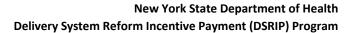
|       | 11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as |  | In Process | Pass & Ongoing | N/A  |  |
|-------|--|--|------------|----------------|------|--|
|       | Enter Reviewer Comment   |  |            |                |      |  |
| Total |  |  |            |                | 1.00 |  |

|            | Domain 2 Pay for Performance and Pay for Reporting Project 2.a.i (all Milestones are P4R in DY2)     |                 |                |  |  |  |  |  |
|------------|--|-----------------|----------------|--|--|--|--|--|
| AV Driving | Measure  | Reviewer Status | AVs<br>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 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   |                |      |
| Children's Access to Primary Care- 12 to 19 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 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 |  |  |
| 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  |                |   |  |  |



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

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| • | 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 |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.b.iii

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

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>5,227,224 |
| DY2 Q4 Payment Earned    | \$<br>5,227,224 |

|          | 2.b.iii Scoresheet                 |               |                  |                    |                  |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|--|--|--|--|--|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |  |  |  |  |  |  |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 3,136,335                    | 3,136,335                     |  |  |  |  |  |  |  |  |  |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |
|          | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 3,136,335                    | 3,136,335                     |  |  |  |  |  |  |  |  |  |  |
| Domain 2 | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 2,090,890                    | 2,090,890                     |  |  |  |  |  |  |  |  |  |  |
| 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%                              | 2,090,890                    | 2,090,890                     |  |  |  |  |  |  |  |  |  |  |
|          | Total                              | Complete      | 22.00            | 22.00              | 100%             | 100%                         | 50%                              | 5,227,224                    | 5,227,224                     |  |  |  |  |  |  |  |  |  |  |

Total Project 2.b.iii AVs Awarded: 22 out of 22

### **Hide Reviewer Comments**

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



| Print                                   |         | <b>3</b> | , ,        | , , ,          | •    |  |  |
|---|---------|----------|------------|----------------|------|--|--|
| 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 M   | ilestones Pr         | oject 2.b.iii         |                     |                 |                |  |
|------------|---|----------------------|-----------------------|---------------------|-----------------|----------------|--|
| AV Driving | Project Requirement and Metric/Deliverable  | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |
|            | Establish ED care triage program for at-risk populations  |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |  |
| •          | <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>Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.</li> <li>Develop process and procedures to establish connectivity between the emergency department and community primary care providers.</li> </ol> |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |  |



|   | Print  |           | Finger Lakes | s Performing | Provider Systems, Inc P          | roject 2.b.iii |  |
|---|--|-----------|--------------|--------------|----------------------------------|----------------|--|
| • | 3. For patients presenting with minor illnesses who do not have a primary care provider:  a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.  b. Patient navigator will assist the patient with identifying and accessing needed community support resources.  c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care |           |              | In Process   | Pass & Ongoing                   | N/A            |  |
|   | Enter Reviewer Comment   |           |              |              |                                  |                |  |
| • | 4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)   | 3/31/2017 | 3/31/2017    | Completed    | Pass (with Exception) & Complete | 0.50           |  |
|   | Enter Reviewer Comment   |           |              |              |                                  |                |  |
| • | 5. Use EHRs and other technical platforms to track all patients engaged in the project.  | 3/31/2017 | 3/31/2017    | Completed    | Pass & Complete                  | 0.50           |  |
|   | Enter Reviewer Comment   |           |              |              |                                  |                |  |
|   | Total  |           |              |              |                                  | 1.00           |  |

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



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| 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   |                |           |
| 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       |



Print

| Print   |                |     |
|---|----------------|-----|
| 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 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  |                |     |



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| 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 |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.b.iv

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

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>4,969,722 |
| DY2 Q4 Payment Earned    | \$<br>4,969,722 |

|          | 2.b.iv Scoresheet                  |               |                  |                    |                  |                              |                                  |                              |                               |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 2,981,833                    | 2,981,833                     |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |
|          | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 2,981,833                    | 2,981,833                     |  |
| Domain 2 | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 1,987,889                    | 1,987,889                     |  |
| 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%                              | 1,987,889                    | 1,987,889                     |  |
|          | Total                              | Complete      | 22.00            | 22.00              | 100%             | 100%                         | 50%                              | 4,969,722                    | 4,969,722                     |  |

Total Project 2.b.iv AVs Awarded: 22 out of 22

### **Hide Reviewer Comments**

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



| Print Print            |   |             |     |            |                 |      |  |  |  |
|------------------------|---|-------------|-----|------------|-----------------|------|--|--|--|
|                        | Enter Reviewer Comment                  |             |     |            |                 |      |  |  |  |
|                        | Module 2 - Project Implementation Speed | Ongoing     | N/A | Completed  | 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                                   |             |     |            | Total           |      |  |  |  |

|            | Domain 1 Project Prescribed M   | ilestones Pr         | oject 2.b.iv          |                     |                 |                |
|------------|---|----------------------|-----------------------|---------------------|-----------------|----------------|
| AV Driving | Project Requirement and Metric/Deliverable                            | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |
|            | 1. Develop standardized protocols for a Care Transitions Intervention |                      |                       |                     |                 |                |
|            | Model with all participating hospitals, partnering with a home care   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.20           |
|            | service or other appropriate community agency.                        |                      |                       |                     |                 |                |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |
|            | 2. Engage with the Medicaid Managed Care Organizations and Health     |                      |                       |                     |                 |                |
|            | Homes to develop transition of care protocols that will ensure        |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|            | appropriate post-discharge protocols are followed.                    |                      |                       |                     |                 |                |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |
|            | 3. Ensure required social services participate in the project.        |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |



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|                        | 4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services. | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |
|------------------------|---|-------------|-----------|-----------|-----------------|------|
|                        | Enter Revie   | ewer Commen | t         |           |                 |      |
|                        | 5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |
|                        | Enter Revie   | wer Commen  | t         |           |                 |      |
|                        | 6. Ensure that a 30-day transition of care period is established.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |
|                        | Enter Revie   | wer Commen  | t         |           |                 |      |
|                        | 7. Use EHRs and other technical platforms to track all patients engaged in the project.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |
| Enter Reviewer Comment |   |             |           |           |                 |      |
| Total                  |   |             |           |           | 1.00            |      |

|            | Domain 2 Pay for Performance and Pay for Reporting Project 2.b.iv (all Milestones are P4R in DY2) |                 |                |  |  |  |
|------------|---|-----------------|----------------|--|--|--|
| AV Driving | Measure   | Reviewer Status | AVs<br>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  |                 |                |  |  |  |



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|   | 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   |                |           |
|   | Helpful, Courteous, and Respectful Office Staff (Q24 and 25)   | Pass & Ongoing | 0.5       |



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| Print   |                |   |
|---|----------------|---|
| 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 |
| Enter Reviewer Comment  |                |   |
|   |                |   |



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| 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 |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.b.vi

| Project Snapshot      |   |  |  |  |  |
|-----------------------|---|--|--|--|--|
| <b>Project Domain</b> | System Transformation Projects (Domain 2) |  |  |  |  |
| Project ID            | 2.b.vi                                    |  |  |  |  |
| Project Title         | Transitional supportive housing services  |  |  |  |  |

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>5,971,552 |
| DY2 Q4 Payment Earned    | \$<br>5,971,552 |

|                   |                                    | 2.b.vi Scores | heet             |                    |                  |                              |                                  |                              |                               |  |  |  |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|
| Domain            | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |
|                   | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |  |
| Domain 1          | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 3,582,931                    | 3,582,931                     |  |  |  |
|                   | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |
|                   | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 3,582,931                    | 3,582,931                     |  |  |  |
| Domain 2          | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 2,388,621                    | 2,388,621                     |  |  |  |
| 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%                              | 2,388,621                    | 2,388,621                     |  |  |  |
|                   | Total                              | Complete      | 22.00            | 22.00              | 100%             | 100%                         | 50%                              | 5,971,552                    | 5,971,552                     |  |  |  |

Total Project 2.b.vi AVs Awarded: 22 out of 22

### Hide Reviewer Comments

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



| 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 M  | ilestones Pr         | oject 2.b.vi          |                     |                 |                |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |
|            | 1. Partner with community housing providers and home care service organizations to develop transitional supportive housing for high-risk patients.   |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
| •          | 2. Develop protocols to identify chronically ill super-utilizers who qualify for this service. Once identified, this targeted population will be monitored using a priority listing for access to transitional supportive housing.               | 3/31/2017            | 3/31/2017             | In Process          | Pass & Complete | 0.20           |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
| •          | 3. Establish MOUs and other service agreements between participating hospitals and community housing providers to allow the supportive housing and home care services staff to meet with patients in the hospital and coordinate the transition. | 3/31/2017            | 3/31/2017             | In Process          | Pass & Complete | 0.20           |  |  |



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.b.vi

|                        | Print  |            | <b>3</b>  | ,          | , ,             | .,   |  |
|------------------------|--|------------|-----------|------------|-----------------|------|--|
|                        | Enter Reviewer Comment   |            |           |            |                 |      |  |
|                        | 4. Establish coordination of care strategies with Medicaid Managed Care Organizations to ensure needed services at discharge are covered and in place at the transitional supportive housing site.   |            |           | In Process | Pass & Ongoing  | N/A  |  |
|                        | Enter Revie  | wer Commer | nt        |            |                 |      |  |
| •                      | 5. Develop transition of care protocols to ensure all chronically ill super-<br>utilizers receive appropriate health care and community support<br>including medical, behavioral health, post-acute care, long-term care and<br>public health services.                  | 3/31/2017  | 3/31/2017 | In Process | Pass & Complete | 0.20 |  |
|                        | Enter Revie  | wer Commer | nt        |            |                 |      |  |
|                        | 6. Ensure medical records and post-discharge care plans are transmitted in a timely manner to the patient's primary care provider and frequently used specialists.   |            |           | In Process | Pass & Ongoing  | N/A  |  |
|                        | Enter Reviewer Comment   |            |           |            |                 |      |  |
|                        | 7. Establish procedures to connect the patient to their Health Home (if a HH member) care manager in the development of the transitional housing plan or provide a "warm" referral for assessment and enrollment into a Health Home (with assignment of a care manager). | 3/31/2017  | 3/31/2017 | In Process | Pass & Complete | 0.20 |  |
| Enter Reviewer Comment |  |            |           |            |                 |      |  |
|                        | 8. Use EHRs and other technical platforms to track all patients engaged in the project.  | 3/31/2017  | 3/31/2017 | In Process | Pass & Complete | 0.20 |  |
|                        | Enter Reviewer Comment   |            |           |            |                 |      |  |
|                        | Total  |            |           |            |                 | 1.00 |  |

Domain 2 Pay for Performance and Pay for Reporting Project 2.b.vi (all Milestones are P4R in DY2)



Print

| AV Driving | Measure  | Reviewer Status | AVs<br>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   |                 |                |
|            | Children's Access to Primary Care- 25 months to 6 years  | Pass & Ongoing  | 0.25           |
|            | Enter Reviewer Comment   |                 |                |



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| 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 able to participate in bidirectional exchange | Pass & Ongoing | 1    |



| 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 |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 2.d.i

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

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>4,381,864 |
| DY2 Q4 Payment Earned    | \$<br>4,381,864 |

|          |                                    | 2.d.i Scores  | heet             |                    |                  |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|--|--|--|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |  |  |  |  |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | 2,629,118                    | 2,629,118                     |  |  |  |  |  |  |  |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |
|          | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 2,629,118                    | 2,629,118                     |  |  |  |  |  |  |  |  |
| Domain 2 | Domain 2 Pay for Reporting (P4R)   | Complete      | 4.00             | 4.00               | 100%             | 40%                          | 20%                              | 1,752,745                    | 1,752,745                     |  |  |  |  |  |  |  |  |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |  |  |  |  |  |  |  |  |
|          | Domain 2 Subtotal                  |               | 4.00             | 4.00               | 100%             | 40%                          | 20%                              | 1,752,745                    | 1,752,745                     |  |  |  |  |  |  |  |  |
|          | Total                              | Complete      | 11.00            | 11.00              | 100%             | 100%                         | 50%                              | 4,381,864                    | 4,381,864                     |  |  |  |  |  |  |  |  |

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

#### **Hide Reviewer Comments**

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



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

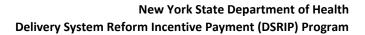
|            | Domain 1 Project Prescribed M  | lilestones P         | roject 2.d.i          |                     |                 |                |  |  |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>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 Reviewer Comment   |                      |                       |                     |                 |                |  |  |  |  |



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### Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Finger Lakes Performing Provider Systems, Inc. - Project 2.d.i

#### 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.





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



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

|            | 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<br>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)
Finger Lakes Performing Provider Systems, Inc. - Project 2.d.i

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - 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 | \$ | 6,019,132 |  |  |  |  |
| DY2 Q4 Payment Earned    | \$ | 3,538,720 |  |  |  |  |

|          | 3.a.i Scoresheet                 |               |                  |                    |                  |                              |                                  |                              |                               |
|----------|----------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Component                        | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational          | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |
| Domain 1 | Project Implementation Speed     | Complete      | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | 2,778,061                    | 2,381,195                     |
|          | Patient Engagement Speed         | Complete      | 1.00             | 0.00               | 0%               |                              |                                  |                              |                               |
|          | Domain 1 Subtotal                |               | 7.00             | 6.00               | 86%              | 60%                          | 30%                              | 2,778,061                    | 2,381,195                     |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete      | 2.00             | 2.00               | 100%             | 9.9%                         | 4.9%                             | 463,010                      | 463,010                       |
| Domain 5 | Domain 3 Pay for Performance     | Complete      | 8.00             | 2.00               | 25%              | 30.1%                        | 30.1%                            | 2,778,061                    | 694,515                       |
|          | Domain 3 Subtotal                |               | 10.00            | 4.00               | 40%              | 40%                          | 35%                              | 3,241,071                    | 1,157,525                     |
|          | Total                            | Complete      | 17.00            | 10.00              | 59%              | 100%                         | 65%                              | 6,019,132                    | 3,538,720                     |

Total Project 3.a.i AVs Awarded: 10 out of 17

#### **Hide Reviewer Comments**

| Domain 1 Project Milestones Project 3.a.i |  |         |                       |                     |                 |                |  |  |  |
|---|--|---------|-----------------------|---------------------|-----------------|----------------|--|--|--|
| AV Driving                                | iving Project Requirement and Metric/Deliverable                   |         | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |  |
|   | Module 1 - Major risks to implementation and mitigation strategies | Ongoing | N/A                   | In Process          | Pass & Ongoing  | N/A            |  |  |  |
|   | Enter Reviewer Comment   |         |                       |                     |                 |                |  |  |  |



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| • | 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 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<br>Driving  | Project Requirement and Metric/Deliverable   | Project Requirement and Metric/Deliverable Required Due Date Due Date Status Reviewer Status |           |            |                 |       |  |  |  |
|               | •  | 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   |  |           |            |                 |       |  |  |  |
|               |  | 2. 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   |            |                 |       |  |  |  |
|               | •  | 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   |  |  |  |
|               |  | Enter Reviewer Comment   |  |           |            |                 |       |  |  |  |



| Prin                   | t |  |              | Finger Lak | es Performing | Provider Systems, Inc | Project 3.a.i |  |  |  |  |
|------------------------|---|--|--------------|------------|---------------|-----------------------|---------------|--|--|--|--|
|                        |   | 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         |  |  |  |  |
|                        |   | Enter Reviewer Comment   |              |            |               |                       |               |  |  |  |  |
|                        |   | 5. Co-locate primary care services at behavioral health sites.   |              |            | In Process    | Pass & Ongoing        | N/A           |  |  |  |  |
|                        |   | En   | ter 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         |  |  |  |  |
|                        |   | En   | ter Reviewer | Comment    |               |                       |               |  |  |  |  |
|                        |   | 9. Implement IMPACT Model at Primary Care Sites.   |              |            | In Process    | Pass & Ongoing        | N/A           |  |  |  |  |
|                        |   | 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 |   |  |              |            |               |                       |               |  |  |  |  |



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

|            | Domain 3 Pay for Performance and Pay for Reporting                     |      |   |  |  |  |  |  |  |
|------------|--|------|---|--|--|--|--|--|--|
| AV Driving | g Measure Reviewer Status  |      |   |  |  |  |  |  |  |
|            | 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  |      |   |  |  |  |  |  |  |



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| Fail           | 0  |
|----------------|--|
|                |  |
| Pass & Ongoing | 1  |
|                |  |
| Fail           | 0  |
|                |  |
| Pass & Ongoing | 0.5  |
|                |  |
| Pass & Ongoing | 0.5  |
|                |  |
|                | Pass & Ongoing  Fail  Fail  Pass & Ongoing |



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

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| Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) | Fail           | 0 |  |  |  |  |
|--|----------------|---|--|--|--|--|
| 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  |                | 4 |  |  |  |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 3.a.ii

|                       | Project Snapshot  |
|-----------------------|---|
| <b>Project Domain</b> | Clinical Improvement Projects (Domain 3)                  |
| Project ID            | 3.a.ii  |
| Project Title         | Behavioral health community crisis stabilization services |

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>5,667,282 |
| DY2 Q4 Payment Earned    | \$<br>3,331,864 |

|          |                                    |               | 3.a.ii Scores    | heet               |                  |                              |                                  |                              |                               |  |  |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 2,615,669                    | 2,242,002                     |  |  |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 0.00               | 0%               |                              |                                  |                              |                               |  |  |  |
|          | Domain 1 Subtotal                  |               | 7.00             | 6.00               | 86%              | 60%                          | 30%                              | 2,615,669                    | 2,242,002                     |  |  |  |
| Domain 3 | Domain 3 Pay for Reporting (P4R)   | Complete      | 2.00             | 2.00               | 100%             | 9.9%                         | 4.9%                             | 435,945                      | 435,945                       |  |  |  |
| Domain 5 | Domain 3 Pay for Performance (P4P) | Complete      | 8.00             | 2.00               | 25%              | 30.1%                        | 30.1%                            | 2,615,669                    | 653,917                       |  |  |  |
|          | Domain 2 Subtotal                  |               |                  | 4.00               | 40%              | 40%                          | 35%                              | 3,051,614                    | 1,089,862                     |  |  |  |
|          | Total                              | Complete      | 17.00            | 10.00              | 59%              | 100%                         | 65%                              | 5,667,282                    | 3,331,864                     |  |  |  |

Total Project 3.a.ii AVs Awarded: 10 out of 17

#### **Hide Reviewer Comments**

| Domain 1 Project Milestones Project 3.a.ii |  |         |                       |                     |                 |                |  |
|--|--|---------|-----------------------|---------------------|-----------------|----------------|--|
| AV Driving                                 | Project Requirement and Metric/Deliverable                         |         | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>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 | Completed  | Fail           | 0    |  |  |
| Enter Reviewer Comment                  |         |     |            |                |      |  |  |
| Total                                   |         |     |            |                |      |  |  |

|            | Domain 1 Project Prescribed Milestones Project 3.a.ii  |                      |                       |                     |                 |                |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |
|            | 1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.  |                      |                       | In Process          | Pass & Ongoing  | NA             |  |  |
|            | Enter Revie  | wer Commen           | nt                    |                     |                 |                |  |  |
|            | 2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services. |                      |                       | In Process          | Pass & Ongoing  | NA             |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
|            | 3. Establish 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  | NA             |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |
|            | 4. Develop written treatment protocols with consensus from participating providers and facilities.   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.25           |  |  |



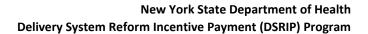
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|   | Print  |                        |           |            |                 |      |  |  |  |
|---|--|------------------------|-----------|------------|-----------------|------|--|--|--|
|   | Enter Revie  | Enter Reviewer Comment |           |            |                 |      |  |  |  |
|   | 5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.  | 3/31/2017              | 3/31/2017 | Completed  | Pass & Complete | 0.25 |  |  |  |
|   | Enter Revie  | wer Commen             | t         |            |                 |      |  |  |  |
|   | 6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).   |                        |           | In Process | Pass & Ongoing  | NA   |  |  |  |
|   | Enter Reviewer Comment   |                        |           |            |                 |      |  |  |  |
|   | 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.  |                        |           | In Process | Pass & Ongoing  | NA   |  |  |  |
|   | Enter Reviewer Comment   |                        |           |            |                 |      |  |  |  |
| • | 8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3. |                        |           | In Process | Pass & Ongoing  | NA   |  |  |  |
|   | Enter Reviewer Comment   |                        |           |            |                 |      |  |  |  |
|   | 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.  |                        |           | In Process | Pass & Ongoing  | NA   |  |  |  |
|   | Enter Reviewer Comment   |                        |           |            |                 |      |  |  |  |
|   | 10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.   | 3/31/2017              | 3/31/2017 | Completed  | Pass & Complete | 0.25 |  |  |  |



| Print  |                | ringer Lake | s Perjorming | Provider Systems, Inc I | Project 3.a.ii |  |
|--|----------------|-------------|--------------|-------------------------|----------------|--|
| Enter Reviewer Comment   |                |             |              |                         |                |  |
| 11. Use EHRs or other technical platforms to track all patients engage this project. | d in 3/31/2017 | 3/31/2017   | Completed    | Pass & Complete         | 0.25           |  |
| Enter Reviewer Comment   |                |             |              |                         |                |  |
| Total  |                |             |              |                         |                |  |

|            | Domain 3 Pay for Performance and Pay for Reporting                                 |                 |                |  |  |  |  |  |  |
|------------|--|-----------------|----------------|--|--|--|--|--|--|
| AV Driving | Measure  | Reviewer Status | AVs<br>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 | Pass & Ongoing  | 1              |  |  |  |  |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |  |  |  |  |
|            | Diabetes Monitoring for People with Diabetes and Schizophrenia                     | Fail            | 0              |  |  |  |  |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |  |  |  |  |





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| 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   |
| 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)         | Fail           | 0   |
| 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   |



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

Save & Return

| Print Print                                     | ng r rovider systems, mer | rroject orum |
|---|---------------------------|--------------|
| P4P Measure DY2Q4                               |                           |              |
| Screening for Clinical Depression and follow-up | Pass & Ongoing            | 1            |
| P4R Measure DY2Q4                               |                           |              |
| Total   |                           | 4            |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 3.a.v

| Project Snapshot   |   |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|
| Project Domain   Clinical Improvement Projects(Domain 3) |   |  |  |  |  |  |  |  |
| Project ID   | 3.a.v   |  |  |  |  |  |  |  |
| Project Title  | Behavioral Interventions Paradigm (BIP) in Nursing<br>Homes |  |  |  |  |  |  |  |

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>6,606,823 |
| DY2 Q4 Payment Earned    | \$<br>5,051,056 |

|                   | 3.a.v Scoresheet                   |               |                  |                    |                  |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|--|--|--|--|
| Domain            | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |  |  |  |  |  |
|                   | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |  |  |  |  |  |  |
| Domain 1          | Project Implementation Speed       | Complete      | 1.00             | 0.93               | 93%              |                              | 30%                              | 3,049,303                    | 3,018,188                     |  |  |  |  |  |  |  |  |
|                   | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |
|                   | Domain 1 Subtotal                  |               | 7.00             | 6.93               | 99%              | 60%                          | 30%                              | 3,049,303                    | 3,018,188                     |  |  |  |  |  |  |  |  |
| Domain 3          | Domain 3 Pay for Reporting (P4R)   | Complete      | 2.00             | 2.00               | 100%             | 9.9%                         | 4.9%                             | 508,217                      | 508,217                       |  |  |  |  |  |  |  |  |
| Domain 5          | Domain 3 Pay for Performance (P4P) | Complete      | 2.00             | 1.00               | 50%              | 30.1%                        | 30.1%                            | 3,049,303                    | 1,524,652                     |  |  |  |  |  |  |  |  |
| Domain 2 Subtotal |                                    |               | 4.00             | 3.00               | 75%              | 40%                          | 35%                              | 3,557,520                    | 2,032,869                     |  |  |  |  |  |  |  |  |
|                   | Total                              | Complete      | 11.00            | 9.93               | 90%              | 100%                         | 65%                              | 6,606,823                    | 5,051,056                     |  |  |  |  |  |  |  |  |

Total Project 3.a.v AVs Awarded: 9.93 out of 11

#### **Hide Reviewer Comments**

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



| Print                                   |           | <b>3</b> |            | ,              | .,   |  |  |  |
|---|-----------|----------|------------|----------------|------|--|--|--|
| Enter Reviewer Comment                  |           |          |            |                |      |  |  |  |
| Module 2 - Project Implementation Speed | 3/31/2017 | N/A      | Completed  | Pass & Ongoing | 0.93 |  |  |  |
| Enter Reviewer Comment                  |           |          |            |                |      |  |  |  |
| Module 3 - Patient Engagement Speed     | Ongoing   | N/A      | In Process | Pass & Ongoing | 1    |  |  |  |
| Enter Reviewer Comment                  |           |          |            |                |      |  |  |  |
| Total                                   |           |          |            |                | 1.93 |  |  |  |

|            | Domain 1 Project Prescribed N   | lilestones Pi        | roject 3.a.v          |                     |                 |                |  |  |  |
|------------|---|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|--|
| AV Driving | Project Requirement and Metric/Deliverable  | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |  |
| •          | 1. Implement BIP Model in Nursing Homes model using SNF skilled nurse practitioners (NP) and psychiatric social workers to provide early assessment, reassessment, intervention, and care coordination for at risk residents to reduce the risk of crisis requiring transfer to higher level of care. | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.07           |  |  |  |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |  |  |  |
|            | 2. Augment skills of the clinical professionals in managing behavioral health issues.   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.07           |  |  |  |
|            | Enter Reviewer Comment  |                      |                       |                     |                 |                |  |  |  |
|            | 3. Enable the non-clinical staff to effectively interact with a behavioral population   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.07           |  |  |  |
|            | Enter Revie   | wer Commen           | nt .                  |                     |                 |                |  |  |  |



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| 4. Assign a NP with Behavioral Health Training as a coordinator of care.  | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
|---|-------------|-----------|-----------|-----------------|------|--|--|--|--|--|
| Enter Reviewer Comment  |             |           |           |                 |      |  |  |  |  |  |
| 5. Implement a Behavior Management Interdisciplinary Team Approach to care.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Revie   | ewer Commen | rt        |           |                 |      |  |  |  |  |  |
| 6. Implement a medication reduction and reconciliation program.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Revie   | ewer Commen | rt        |           |                 |      |  |  |  |  |  |
| 7. Increase the availability of psychiatric and psychological services via telehealth and urgently available providers.               | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Reviewer Comment  |             |           |           |                 |      |  |  |  |  |  |
| 8. Provide holistic psychological Interventions.  | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Revie   | ewer Commen | rt        |           |                 |      |  |  |  |  |  |
| 9. Provide enhanced recreational services.  | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Revie   | ewer Commen | rt        |           |                 |      |  |  |  |  |  |
| 10. Develop crisis intervention strategies via development of an algorithm for staff intervention and utilization of sitter services. | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |
| Enter Revie   | ewer Commen | rt        |           |                 |      |  |  |  |  |  |
| 11. Improve documentation and communication re: patient status.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.07 |  |  |  |  |  |



| Print  |              | ringer Lake | s Performing | Provider Systems, Inc F | roject 3.a.v |  |  |  |
|--|--------------|-------------|--------------|-------------------------|--------------|--|--|--|
| Enter Reviewer Comment   |              |             |              |                         |              |  |  |  |
| 12. Modify the facility environment.   | 3/31/2017    | 3/31/2017   | Completed    | Pass & Complete         | 0.07         |  |  |  |
| Enter Rev  | iewer Commer | nt          |              |                         |              |  |  |  |
| 13. Formal agreements with the Medicaid Managed Care organizations (including MLTC and FIDA plans) serving the affected population to provide coverage for the service array under this project. | 3/31/2017    | 3/31/2017   | Completed    | Fail                    | 0.00         |  |  |  |
| Enter Reviewer Comment   |              |             |              |                         |              |  |  |  |
| 14. Use EHRs or other technical platforms to track all patients engaged this project.  | n 3/31/2017  | 3/31/2017   | Completed    | Pass & Complete         | 0.07         |  |  |  |
| Enter Reviewer Comment   |              |             |              |                         |              |  |  |  |
| Total  |              |             |              |                         |              |  |  |  |

|            | Domain 3 Pay for Performance and Pay for Reporting          |                 |                |
|------------|---|-----------------|----------------|
| AV Driving | Measure   | Reviewer Status | AVs<br>Awarded |
|            | Antipsychotic Use in Persons with Dementia                  | Pass & Ongoing  | 1              |
|            | P4P Measure DY2Q4   |                 |                |
|            | Percent of Long Stay Residents who have Depressive Symptoms | Fail            | 0              |
|            | P4P Measure DY2Q4   |                 |                |
|            | Antipsychotic Use in Persons with Dementia                  | Pass & Ongoing  | 1              |



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 C Finger Lakes Performing Provider Systems, Inc Projection |                |      |  |
|--|----------------|------|--|
| P4R Measure DY2Q4  |                |      |  |
| Percent of Long Stay Residents who have Depressive Symptoms  | Pass & Ongoing | 1    |  |
| P4R Measure DY2Q4  |                |      |  |
| Total  |                | 3.00 |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 3.f.i

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

| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>5,285,459 |
| DY2 Q4 Payment Earned    | \$<br>5,285,459 |

|                | 3.f.i Scoresheet                 |          |                  |                    |                  |                              |                                  |                              |                               |  |  |  |
|----------------|----------------------------------|----------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|
| Domain         | Domain Component                 |          | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |
|                | Domain 1 Organizational          | Complete | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |  |  |  |
| Domain 1       | Project Implementation Speed     | Complete | 0.00             | 0.00               | 0%               | 60%                          | 30%                              | 2,439,442                    | 2,439,442                     |  |  |  |
|                | Patient Engagement Speed         | Complete | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |
|                | Domain 1 Subtotal                |          | 6.00             | 6.00               | 100%             | 60%                          | 30%                              | 2,439,442                    | 2,439,442                     |  |  |  |
| Domain 3       | Domain 3 Pay for Reporting (P4R) | Complete | 6.00             | 6.00               | 100%             | 9.9%                         | 4.9%                             | 406,574                      | 406,574                       |  |  |  |
| Domain 5       | Domain 3 Pay for Performance     |          | 1.00             | 1.00               | 100%             | 30.1%                        | 30.1%                            | 2,439,442                    | 2,439,442                     |  |  |  |
|                | Domain 3 Subtotal                |          |                  | 7.00               | 100%             | 40%                          | 35%                              | 2,846,016                    | 2,846,016                     |  |  |  |
| Total Complete |                                  |          | 13.00            | 13.00              | 100%             | 100%                         | 65%                              | 5,285,459                    | 5,285,459                     |  |  |  |

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

### **Hide Reviewer Comments**

|        | Domain 1 Project Milestones Project 3.f.i                          |                      |                       |                 |                |                |  |  |  |  |
|--------|--|----------------------|-----------------------|-----------------|----------------|----------------|--|--|--|--|
| AV Dri | ving Project Requirement and Metric/Deliverable                    | Required<br>Due Date | Committed<br>Due Date | Reviewer Status |                | AVs<br>Awarded |  |  |  |  |
|        | Module 1 - Major risks to implementation and mitigation strategies | Ongoing              | N/A                   | In Process      | Pass & Ongoing | N/A            |  |  |  |  |



| Print                                   |             | <b>g</b>  | ,          | <b>5</b> · · · · · · · · · · · · · · · · · · · | ,,  |  |  |  |
|---|-------------|-----------|------------|--|-----|--|--|--|
| Enter Reviewer Comment                  |             |           |            |  |     |  |  |  |
| Module 2 - Project Implementation Speed | 9/30/2016   | 9/30/2016 | Completed  | Pass & Complete                                | N/A |  |  |  |
| 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.f.i Models 1, 2 and 3 |  |                      |                       |                     |                 |                |  |  |  |  |
|---------------|--|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|--|--|
|               | ✓ 3.f.i Model 1 ✓ 3.f.i Model 2 ✓ 3.f.i Model 3                        |  |                      |                       |                     |                 |                |  |  |  |  |
| Model         | AV<br>Driving  | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |  |  |
|               |  | Implement an evidence-based home visitation model, such as the Nurse Family Partnership, for pregnant high-risk mothers including high-risk first time mothers.    | 9/30/2016            | 9/30/2016             | Completed           | N/A             | N/A            |  |  |  |  |
|               |  | En   | ter Reviewer         | Comment               |                     |                 |                |  |  |  |  |
|               |  | 2. Develop a referral system for early identification of women who are or may be at high-risk.   | 9/30/2016            | 9/30/2016             | Completed           | N/A             | N/A            |  |  |  |  |
| 3.f.i Model 1 |  | En   | ter Reviewer         | Comment               |                     |                 |                |  |  |  |  |
| 3.1.1 MOUGH 1 |  | 3. Establish a quality oversight committee of OB/GYN and primary care providers to monitor quality outcomes and implement new or change activities as appropriate. | 9/30/2016            | 9/30/2016             | Completed           | N/A             | N/A            |  |  |  |  |
|               |  | En   | ter Reviewer         | Comment               |                     |                 |                |  |  |  |  |



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| <u>'</u>      | Print |  |              |           |           |     |     |  |
|---------------|-------|--|--------------|-----------|-----------|-----|-----|--|
|               |       | 4. Use EHRs or other IT platforms to track all patients engaged in this project.   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|               |       | Ent  | ter Reviewer | Comment   |           |     |     |  |
|               | •     | 5. Identify and engage a regional medical center with expertise in management of high-risk pregnancies and infants (must have Level 3 NICU services or Regional Perinatal Center).                               | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|               |       | Ent  | ter Reviewer | Comment   |           |     |     |  |
|               | •     | 6. Develop a multidisciplinary team of experts with clinical and social support expertise who will co-manage care of the high-risk mother and infant with local community obstetricians and pediatric providers. | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|               |       | Enter Reviewer Comment   |              |           |           |     |     |  |
|               |       | 7. Develop service MOUs between multidisciplinary team and OB/GYN providers.   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|               |       | Ent  | ter Reviewer | Comment   |           |     |     |  |
| 3.f.i Model 2 |       | 8. Utilize best evidence care guidelines for management of high risk pregnancies and newborns and implement uniform clinical protocols based upon evidence-based guidelines.                                     | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
| 5.1.1 Model 2 |       | Ent  | ter Reviewer | Comment   |           |     |     |  |



|                        | Print |   |              |           |           |     |     |  |
|------------------------|-------|---|--------------|-----------|-----------|-----|-----|--|
|                        | •     | 9. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3. | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|                        |       | Ent   | ter Reviewer | Comment   |           |     |     |  |
|                        |       | 10. Ensure that EHR systems or other IT platforms used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|                        |       | Enter Reviewer Comment  |              |           |           |     |     |  |
|                        |       | 11. Use EHRs or other IT platforms to track all patients engaged in this project.   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
| Enter Reviewer Comment |       |   |              |           |           |     |     |  |
|                        |       | the model of the Maternal and Infant Community Health  Collaboratives (MICHC) program: access NYSDOH-funded CHW   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|                        |       |   | ter Reviewer | Comment   |           |     |     |  |
|                        |       | 13. Employ a Community Health Worker Coordinator responsible for supervision of 4 – 6 community health workers. Duties and qualifications are per NYS DOH criteria.   | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |
|                        |       |   | ter Reviewer | Comment   |           |     |     |  |
|                        |       | Workers who meet criteria such as cultural competence,  | 9/30/2016    | 9/30/2016 | Completed | N/A | N/A |  |



|               | Print |  |                        | Finger Lak | es Performin | g Provider Systems, Inc | Project 3.f.i |
|---------------|-------|--|------------------------|------------|--------------|-------------------------|---------------|
| 3.f.i Model 3 |       | Ent  | Enter Reviewer Comment |            |              |                         |               |
|               |       | 15. Establish protocols for deployment of CHW.   | 9/30/2016              | 9/30/2016  | Completed    | N/A                     | N/A           |
|               |       | Ent  | Enter Reviewer Comment |            |              |                         |               |
|               |       | 16. Coordinate with the Medicaid Managed Care organizations serving the target population. | 9/30/2016              | 9/30/2016  | Completed    | N/A                     | N/A           |
|               |       | Ent  | Enter Reviewer Comment |            |              |                         |               |
|               |       | 17. Use EHRs or other IT platforms to track all patients engaged in this project.          | 9/30/2016              | 9/30/2016  | Completed    | N/A                     | N/A           |
|               |       | Enter Reviewer Comment   |                        |            |              |                         |               |
|               |       | Total  |                        |            |              |                         | 0             |

|            | Domain 3 Pay for Performance and Pay for Reporting      |                 |                |  |  |  |  |
|------------|---|-----------------|----------------|--|--|--|--|
| AV Driving | Measure   | Reviewer Status | AVs<br>Awarded |  |  |  |  |
|            | Childhood Immunization Status (Combination 3 – 4313314) | Pass & Ongoing  | 1              |  |  |  |  |
|            | P4R Measure DY2Q4                                       |                 |                |  |  |  |  |
|            | Early Elective Deliveries ±                             | Pass & Ongoing  | 1              |  |  |  |  |
|            | P4R Measure DY2Q4                                       |                 |                |  |  |  |  |
|            | Frequency of Ongoing Prenatal Care (81% or more)        | Pass & Ongoing  | 1              |  |  |  |  |
|            | P4R Measure DY2Q4                                       |                 |                |  |  |  |  |



|                   | Print Finger Lakes Performing Provider Systems, Inc Pro    |                |     |  |  |  |
|-------------------|--|----------------|-----|--|--|--|
|                   | Lead Screening in Children                                 | Pass & Ongoing | 1   |  |  |  |
|                   | P4R Measure DY2Q4  |                |     |  |  |  |
|                   | Prenatal and Postpartum Care - Postpartum Visits           | Pass & Ongoing | 0.5 |  |  |  |
|                   | P4R Measure DY2Q4  |                |     |  |  |  |
|                   | Prenatal and Postpartum Care - Timeliness of Prenatal Care | Pass & Ongoing | 0.5 |  |  |  |
|                   | P4R Measure DY2Q4  |                |     |  |  |  |
|                   | Prevention Quality Indicator # 9 Low Birth Weight ±        | Pass & Ongoing | 1   |  |  |  |
|                   | P4P Measure DY2Q4  |                |     |  |  |  |
|                   | Well Care Visits in the first 15 months (5 or more Visits) | Pass & Ongoing | 1   |  |  |  |
| P4R Measure DY2Q4 |  |                |     |  |  |  |
|                   | Total  |                | 7   |  |  |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 4.a.iii

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

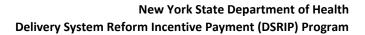
| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>2,541,086 |
| DY2 Q4 Payment Earned    | \$<br>2,541,086 |

|          | 4.a.iii Scoresheet                 |               |                  |                    |                  |                              |                                  |                              |                               |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  | 1,524,652                    | 1,524,652                     |
| Domain 1 | Project Implementation Speed       | N/A           | 0.00             | 0.00               | 0%               |                              | 30%                              |                              |                               |
|          | Patient Engagement Speed           | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |
|          | Domain 1 Subtotal                  |               | 5.00             | 5.00               | 100%             | 60%                          | 30%                              | 1,524,652                    | 1,524,652                     |
| Domain 4 | Domain 4 Pay for Reporting (P4R)   | Complete      | 11.00            | 11.00              | 100%             | 40%                          | 20%                              | 1,016,434                    | 1,016,434                     |
| 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%                              | 1,016,434                    | 1,016,434                     |
|          | Total                              | Complete      | 16.00            | 16.00              | 100%             | 100%                         | 50%                              | 2,541,086                    | 2,541,086                     |

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

#### **Hide Reviewer Comments**

| Domain 4 Pay for Performance and Pay for Reporting Project 4.a.iii (all Milestones are P4R in DY2) |  |                 |                |  |  |
|--|--|-----------------|----------------|--|--|
| AV Driving   | Measure  | Reviewer Status | AVs<br>Awarded |  |  |
|  | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-<br>Hispanics | Pass & Ongoing  | 1              |  |  |





Print

| Trine   |                |   |
|---|----------------|---|
| 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)
Finger Lakes Performing Provider Systems, Inc. - Project 4.a.iii

#### Print

|  | Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month                                  | Pass & Ongoing | 1     |
|--|--|----------------|-------|
|  | 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 |



Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Finger Lakes Performing Provider Systems, Inc. - Project 4.b.ii

| Project Snapshot  |   |  |  |  |  |
|---|---|--|--|--|--|
| Project Domain   Domain 4: Population-wide Projects: New York's |   |  |  |  |  |
| Project ID  | 4.b.ii  |  |  |  |  |
|   | Increase Access to High Quality Chronic Disease |  |  |  |  |
| <b>Project Title</b>  | Preventive Care and Management in Both Clinical |  |  |  |  |
|   | and Community Settings                          |  |  |  |  |

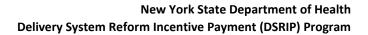
| Payment Snapshot         |                 |
|--------------------------|-----------------|
| DY2 Q4 Payment Available | \$<br>2,159,923 |
| DY2 Q4 Payment Earned    | \$<br>2,159,923 |

| 4.b.ii Scoresheet |                                    |               |                  |                    |                  |                              |                                  |                              |                               |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain            | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
| Domain 1          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          | 30%                              | 1,295,954                    |                               |
|                   | Project Implementation Speed       | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              | 1,295,954                     |
|                   | Patient Engagement Speed           | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |
| Domain 1 Subtotal |                                    |               | 5.00             | 5.00               | 100%             | 60%                          | 30%                              | 1,295,954                    | 1,295,954                     |
| Domain 4          | Domain 4 Pay for Reporting (P4R)   | Complete      | 16.00            | 16.00              | 100%             | 40%                          | 20%                              | 863,969                      | 863,969                       |
|                   | Domain 4 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |
| Domain 4 Subtotal |                                    |               | 16.00            | 16.00              | 100%             | 40%                          | 20%                              | 863,969                      | 863,969                       |
| Total Complete    |                                    | 21.00         | 21.00            | 100%               | 100%             | 50%                          | 2,159,923                        | 2,159,923                    |                               |

Total Project 4.b.ii AVs Awarded: 21 out of 21

#### **Hide Reviewer Comments**

| Domain 4 Pay for Performance and Pay for Reporting |  |                 |                |  |  |  |  |
|--|--|-----------------|----------------|--|--|--|--|
| AV Driving   | Measure  | Reviewer Status | AVs<br>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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|    | Time  |                |   |  |  |  |
|----|---|----------------|---|--|--|--|
|    | Enter Reviewer Comment  |                |   |  |  |  |
|    | Asthma emergency department visit rate per 10,000   | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
|    | Asthma emergency department visit rate per 10,000 - Aged 0-4 years  | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
| Pe | Percentage of adults who are obese  | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
| •  | Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
| •  | Percentage of adults with health insurance - Aged 18- 64 years  | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
|    | Percentage of children and adolescents who are obese  | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |
| •  | Percentage of premature death (before age 65 years)   | Pass & Ongoing | 1 |  |  |  |
|    | Enter Reviewer Comment  |                |   |  |  |  |



White non-Hispanics

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

Finger Lakes Performing Provider Systems, Inc. - Project 4.b.ii

#### Print 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 heart attack hospitalization rate per 10,000 Pass & Ongoing 1 Enter Reviewer Comment Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years Pass & Ongoing 1 Enter Reviewer Comment Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years 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** Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years - Ratio of Black non-Hispanics to Pass & Ongoing 1



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)
Finger Lakes Performing Provider Systems, Inc. - Project 4.b.ii

Print

Enter Reviewer Comment

Total 16.00