

Print Summary Print All Achievement Value (AV) Scorecard NYU Lutheran Medical Center

	PPS Information						
Quarter	DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)						
PPS	NYU Lutheran Medical Center						
PPS Number	32						

A	chievement V	/alue (AV) Sco	recard Summa	ary		
Project Link (click on the purple link below to access		AV [	Data		Payme	ent Data
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY2 Q4 Payment Available	DY2 Q4 Payment Earned
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment
2.a.i	21.00	21.00	0.00	21.00	\$ 1,188,653	\$ 1,188,653
2.b.iii	22.00	22.00	0.00	22.00	\$ 848,255	\$ 848,255
2.b.ix	22.00	22.00	0.00	22.00	\$ 762,339	\$ 762,339
2.c.i	22.00	22.00	0.00	22.00	\$ 798,612	\$ 798,612
3.a.i	15.50	13.63	0.00	13.63	\$ 1,019,363	\$ 885,588
3.c.i	13.00	12.50	0.00	12.50	\$ 766,034	\$ 740,780
3.d.ii	15.00	12.50	0.00	12.50	\$ 793,067	\$ 603,515
4.b.i	14.00	14.00	0.00	14.00	\$ 525,389	\$ 525,389
4.c.ii	16.00	16.00	0.00	16.00	\$ 434,141	\$ 434,141

NEW YORK STATE         Department of Health         Medicaid Redesign Team         New York State Department of Delivery System Reform Incentive Payment (DSRIP) P									
Print Summary Print All					Achievement V NYU Luthe	• •			
AV Adjustments (Column F)									
Total	160.50	155.63	0.00	155.63	\$ 7,135,853	\$	6,787,272		



Print

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

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

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

	Workforce Strategy										
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded				
Workforce Strategy Budget Updates		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete					



S	ave & R		Achieveme	ent Value (AV) S	-	Q4 January 1, 2017 - March 31, Medical Center - Domain 1 Orgo
2	Prin					-
		<ol> <li>Define target workforce state (in line with DSRIP program's goals)</li> </ol>	N/A	N/A	In Process	Pass & Ongoing
					1	
		2. Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing
Strategy Budget		current state assessment of workforce	N/A	N/A	In Process	Pass & Ongoing
Updates (non AV- driving)		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	6/30/2016	N/A	Completed	Pass & Complete
		partial placements				
-					1	
		5. Develop training strategy	9/30/2016	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



Sa	ve & Re	eturn	Achievem	ent Value (AV) S		4 January 1, 2017 - March 31, 2	
	Print				NYU Lutheran N	Aedical Center - Domain 1 Orga	inization
	•	Major Dependencies on Organizational Workstreams Roles and Responsibilities	N/A N/A	N/A N/A	In Process In Process	Pass & Ongoing Pass & Ongoing	
dditional 'orkforce rategy opic Areas	•	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
-	•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
-		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

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



1

1

Quarterly Project Reports, Project Budget and Flow of Funds       Module 1.2 - PPS Budget Report (Quarterly Ongoing       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.3 - PPS Flow of Funds (Baseline)       Ongoing       N/A       Completed       Pass & Complete         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing		Print				NYU Lutheran N	viedical Center - Domain 1 Orga
Quarterly Project Reports, Project Budget and Flow of Funds       Module 1.3 - PPS Flow of Funds (Baseline)       Ongoing       N/A       Completed       Pass & Complete         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Quarterly Progress Reports       N/A       N/A       In Process       Pass & Ongoing							
Project Reports, Project Budget and Flow of Funds       Module 1.3 - PPS Flow of Funds (Baseline)       Ongoing       N/A       Completed       Pass & Complete         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Module 1.4 - PPS Flow of Funds (Quarterly)       N/A       N/A       In Process       Pass & Ongoing			Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing
Project Budget and Flow of Funds       Module 1.3 - PPS Flow of Funds (Baseline)       Ongoing       N/A       Completed       Pass & Complete         N/A       Pass & Completed         Image: Project Budget and Flow of Funds       Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Image: Pass & Quarterly Progress Reports       N/A       N/A       In Process       Pass & Ongoing	Project Reports,						
Budget and Flow of Funds       Module 1.4 - PPS Flow of Funds (Quarterly)       Ongoing       N/A       In Process       Pass & Ongoing         Quarterly Progress Reports       N/A       N/A       In Process       Pass & Ongoing			Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete
Module 1.4 - PPS Flow of Funds (Quarterly)     Ongoing     N/A     In Process     Pass & Ongoing       Quarterly Progress Reports     N/A     N/A     In Process     Pass & Ongoing	-						
Quarterly Progress Reports     N/A     N/A     In Process     Pass & Ongoing	Funds		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing
			Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing

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

### Total

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

Save & Return



)	Print					-	
Updates							1
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete	
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Update							
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	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-	•	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	N/A
driving)							
		8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete	
	•						

Save & Return

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



Save & Return

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

	Print				NYU Lutheran I	Medical Center - Domain 1 Orga	nizational AVS
		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							<b>NI ( A</b>
Governance 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

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

Section 03 - Financial Sustainability



## Save & Return

Print

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

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	
		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 Update		<ol> <li>Finalize Compliance Plan consistent with New York State Social Services Law</li> <li>363-d</li> </ol>	12/31/2015	N/A	Completed	Pass & Complete	1
		4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



Pass & Ongoing Roles and Responsibilities N/A N/A In Process Additional Financial N/A Stability N/A Pass & Ongoing Key Stakeholders N/A In Process Topic Areas IT Expectations N/A N/A In Process Pass & Ongoing N/A N/A Progress Reporting Pass & Ongoing In Process Total 1

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

	Section 04 - Cultural Competency & Health Literacy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		<ol> <li>Finalize cultural competency / health literacy strategy.</li> </ol>	12/31/2015	N/A	Completed	Pass & Complete			
Cultural Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language- appropriate material).	6/30/2016	N/A	Completed	Pass & Complete	1		

Save & Return Print



Save & Return

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

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

	Print				NYU Lutheran N	Aedical Center - Domain 1 Orga	nizati
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
-		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
dditional	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Cultural Competency							
Health iteracy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
opic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
-							
	•	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				

	Section 05 - IT Systems and Processes								
Proce Measu		Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		



Sa	ave & R	eturn	Achievem	ent Value (AV) S	-	24 January 1, 2017 - March 31, 2	• •
	Print				NYU Lutheran I	Medical Center - Domain 1 Orga	inizational AVs
	•	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).	3/31/2016	N/A	Complete	Pass & Complete	
		2. Develop an IT Change Management Strategy.	6/30/2016	N/A	Complete	Pass & Complete	
IT Systems and Processes							
		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	3/31/2017	N/A	Complete	Pass & Complete	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	3/31/2017	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



Pass & Ongoing

Pass & Ongoing

Pass & Ongoing

N/A

0

	ent Value (AV) S	Achieveme	eturn	ive & Re	Sa
IYU Lutheraı				Print	
				-	Additional
In Process	N/A	N/A	Roles and Responsibilities		IT Systems
					Processes
In Process	N/A	N/A	Key Stakeholders		TOPIC Aleas
In Process	N/A	N/A	Progress Reporting		
	N/A	N/A	Key Stakeholders	•	and

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

Section 06 - Performance Reporting									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
Performanc e Reporting		<ol> <li>Establish reporting structure for PPS- wide performance reporting and communication.</li> </ol>	3/31/2017	N/A	Completed	Pass & Complete	N/A		
	•	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		

Total



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

NYU Lutheran Medical Center - Domain 1 Organizational AVs Print Major Risks to Implementation & Risk N/A Pass & Ongoing N/A In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A Pass & Ongoing In Process Workstreams Roles and Responsibilities N/A N/A Pass & Ongoing In Process Additional Performanc N/A e Reporting N/A Key Stakeholders N/A Pass & Ongoing In Process Topic Areas IT Expectations N/A Pass & Ongoing N/A In Process Progress Reporting N/A N/A Pass & Ongoing In Process Total 0

	Section 07 - Practitioner Engagement									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		1. Develop Practitioners communication and engagement plan.	12/31/2016	N/A	Completed	Pass & Complete				

Save & Return



Save & Return

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

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

#### NYU Lutheran Medical Center - Domain 1 Organizational AVs Print 2. Develop training / education plan Practitioner targeting practioners and other N/A Engagement professional groups, designed to educate N/A N/A In Process Pass & Ongoing them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A Pass & Ongoing N/A In Process Workstreams Roles and Responsibilities N/A N/A In Process Pass & Ongoing Additional Practitioner N/A Engagement Key Stakeholders N/A N/A Pass & Ongoing In Process Topic Areas N/A Pass & Ongoing **IT Expectations** N/A In Process Pass & Ongoing Progress Reporting N/A N/A In Process

NEW YORK STATE Of Health Medicaid Redesign Te	eam New York State Depart Delivery System Reform Incentive Payment (E	
Save & Return	Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2 NYU Lutheran Medical Center - Domain 1 Orga	
Print	NTO Latheran Meanair - Donain 1 Orga	mzational AV3
	Total	0

Section 08 - Population Health Management							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Population Health	•	<ol> <li>Develop population health management roadmap.</li> </ol>	3/31/2017	N/A	Complete	Pass & Complete	N/A
	•	2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	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	
Additional Population							N/A
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	



Save & Return

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

NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

Print				NYO Lutheran N	viedical Center - Domain 1 Orgo
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
		Total			

	Section 09 - Clinical Integration							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		<ol> <li>Perform a clinical integration 'needs assessment'.</li> </ol>	3/31/2017	N/A	Completed	Pass & Complete	N/A	
Clinical							N/A	
Integration		2. Develop a Clinical Integration strategy.	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		



Sa	ave & Re	turn	Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 20						
	Print		NYU Lutheran Medical Center - Domain 1 Organiz						
Additional Clinical Integration Topic Areas			-				N/A		
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A		
			1						
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing			
			Total				0		



Save & Return Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center AV Adjustments

AV Adjustment Scoresheet													
	AVs Per	AV/s Dor Total		Total Total AV/a		Per Total Total AVs Total AVs Awarded Adjusted		Total AVs Awarded		Adjusted	Net AVs Awarded		
Adjustment	Project		Project		Available	Net	Percentage	AUJUSTEU	Net	Percentage AV			
		Selected	Available	Awarded	AV	AVS	Awarded	Fercentage AV					
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%					
Project Adjustments (applied to one project only)	Various	9.00	115.50	110.63	96%	0.00	110.63	96%					
Total			160.50	155.63	97%	0.00	155.63	97%					

Hide Reviewer Comments

Organizational

Project Adjustments

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



Save & Return

Print

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

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

	-	NYU Lutheran	Medical	Center - P	roject 2.a.	i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 1,188,653
DY2 Q4 Payment Earned	\$ 1,188,653

	2.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%	60%	)% 30%	713,192	713,192
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		6.00	6.00	100%	60%	30%	713,192	713,192
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	475,461	475,461
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%	475,461	475,461
	Total	Complete	21.00	21.00	100%	100%	50%	1,188,653	1,188,653

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 Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded					
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A		Pass & Ongoing	N/A					
	Enter Reviewer Comment										



Save & Return	
Print	

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

	Domain 1 Project Prescribed N	lilestones - P	roject 2.a.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
•	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.			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 Revie	wer Commer	nt		Pass & Ongoing Pass & Complete				
	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			



Save & Return Print

Enter Revie	wer Commen	nt			
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 Commer	nt		Pass & Ongoing Pass & Ongoing Pass & Ongoing Pass & Ongoing Pass & Complete Pass & Complete	
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 Commer	ot			
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 Commer	ot			
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 Commer	nt			
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 Revie	wer Commer	nt			
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.			In Process	Pass & Ongoing	N/A
Enter Revie	wer Commen	nt			



# Save & Return Print

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

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R i	n DY2)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
	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		



# Save & Return Print

Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
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



### Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 2.a.i Print 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 Pass & Ongoing 1 to participate in bidirectional exchange 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 Pass & Ongoing 1 reimbursement 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

NY S	EW ORK TATE of Health	Medicaid Redesign Team		New York State Departme m Incentive Payment (DSF	
	Save & Return Print		Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 NYU L	7 - March 31, 2017 (Payme Lutheran Medical Center -	
	Primary Care - Length	of Relationship - Q3		Pass & Ongoing	0.5
			Enter Reviewer Comment		
	Primary Care - Usual So	ource of Care - Q2		Pass & Ongoing	0.5
			Enter Reviewer Comment		
			Total		15.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 2.b.iii

Project Snapshot		Payment Snapshot				
<b>Project Domain</b>	System Transformation Projects		DY2 Q4 Payment Available	\$	848,255	
Project ID	2.b.iii	1	DY2 Q4 Payment Earned	\$	848,255	
Project Title	ED care triage for at-risk populations					

	2.b.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60% 30		508,953	508,953
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%		
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	508,953	508,953
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	339,302	339,302
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%	339,302	339,302
	Total	Complete	22.00	22.00	100%	100%	50%	848,255	848,255

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

## Hide Reviewer Comments

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

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

Enter Reviewer Comment								
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00			
Enter Revie	ewer Commen	it						
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.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded				
	1. Establish ED care triage program for at-risk populations			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>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.</li> <li>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.</li> </ol>			In Process	Pass & Ongoing	N/A				
	Enter Reviewer Comment									



Save & Return

Print



Save & Return Achievement Value (A	AV) Scorecard	d DY2, Q4 Jan	=	- March 31, 2017 (Paymer	-			
Print			NYOLU	theran Medical Center - P	roject 2.b.m			
<ul> <li>3. For patients presenting with minor illnesses who do not have a primary care provider:</li> <li>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.</li> <li>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.</li> <li>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care</li> </ul>			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 Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333					
	Enter Reviewer Comment							



Save	e &	Return	
	Pr	int	

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



Save & Return	
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		



Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 NYU Lu	7 - March 31, 2017 (Payme Itheran Medical Center - P	•
Print 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



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 2.b.ix

	Project Snapshot	Payment Snapshot	
<b>Project Domain</b>	System Transformation Projects (Domain 2)	DY2 Q4 Payment Available	\$ 762,339
Project ID	2.b.ix	DY2 Q4 Payment Earned	\$ 762,339
Project Title	Implementation of observational programs in hospitals		

		2.b.ix Scores	sheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)						
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%									
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%	457,403	457,403						
	Patient Engagement Speed	Complete	1.00	1.00	100%										
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	457,403	457,403						
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	304,936	304,936						
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%	304,936	304,936						
	Total	Complete	22.00	22.00	100%	100%	50%	762,339	762,339						

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

## Hide Reviewer Comments

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

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

-	Enter Reviewer Comment						
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00	
	Enter Revie	wer Commen	t				
	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.ix				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	2. Create clinical and financial model to support the need for the unit.			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.50	
	Enter Reviewer Comment						

#### NEW YORK STATE Of Health Medicaid Redesign Team

Save & Return

Print



	Save & Return Achievement Value	Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)					
	Print			NYU Lu	theran Medical Center - P	roject 2.b.ix	
•	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 Direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.			In Process	Pass & Ongoing	N/A	
	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.ix (all Milestones are P4R in DY2)						
AV Driving	Measure	<b>Reviewer Status</b>	AVs Awarded				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333				
	Enter Reviewer Comment						
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1				



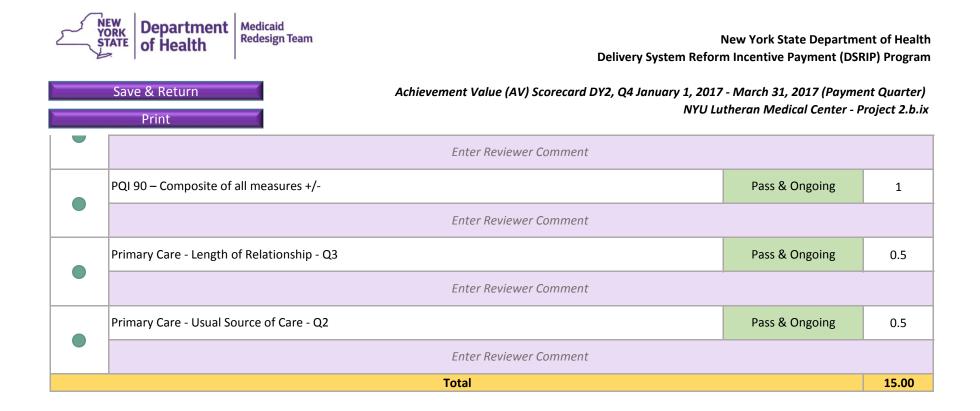
Save & Return	
Drint	
Print	

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



Save & Return	
Print	

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





Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 2.c.i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 798,612
DY2 Q4 Payment Earned	\$ 798,612

			2.c.i Scores	heet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)								
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%											
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		60% 30%	479,167	479,167								
	Patient Engagement Speed	Complete	1.00	1.00	100%												
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	479,167	479,167								
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	319,445	319,445								
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%	319,445	319,445								
	Total	Complete	22.00	22.00	100%	100%	50%	798,612	798,612								

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

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

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

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

	Domain 1 Project Prescribed Milestones - Project 2.c.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
	2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20		
	Enter Reviewer Comment							
	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20		
	Enter Reviewer Comment							
	4. Resource appropriately for the community navigators, evaluating placement and service type.			In Process	Pass & Ongoing	N/A		

NEW<br/>YORK<br/>STATEDepartment<br/>Of HealthMedicaid<br/>Redesign Team

Save & Return

Print



Save & Return Print

	Enter Reviewer Comment						
	5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.			In Process	Pass & Ongoing	N/A	
	Enter Revie	ewer Commen	nt				
	6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20	
	Enter Reviewer Comment						
	7. Market the availability of community-based navigation services.	3/31/2017	3/31/2017	Completed	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	Completed	Pass & Complete	0.20	
	Enter Reviewer Comment						
Total							

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



Save & Return

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

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



Sav	e &	Return	
	Pri	int	

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



Save & Return	
Print	

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



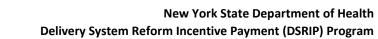
Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 3.a.i

	Project Snapshot	Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)	DY2 Q4 Payment Available	\$ 1,019,363
Project ID	3.a.i	DY2 Q4 Payment Earned	\$ 885,588
Project Title	Integration of primary care and behavioral health services		

	3.a.i Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%						
Domain 1	Project Implementation Speed	Complete	1.00	0.63	63%		30%	470,475	445,271			
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal		7.00	6.63	95%	60%	30%	470,475	445,271			
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	4.9%	78,413	78,413			
Domain 5	Domain 3 Pay for Performance	complete	6.50	5.00	77%	30.1%	30.1%	470,475	361,904			
	Domain 3 Subtotal				82%	40%	35%	548,888	440,317			
Total Complet			15.50	13.63	88%	100%	65%	1,019,363	885,588			

Total Project 3.a.i AVs Awarded: 13.625 out of 15.5

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



NEW YORK STATE Department of Health Medicaid Redesign Team

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

Enter Reviewer Comment						
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.63	
Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
Enter Reviewer Comment						
Total						

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3								
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3								
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
		1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.			In Process	Pass & Ongoing	N/A		
		Ent	ter 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	Enter Reviewer Comment						

Save & Return

Print



Save & Return

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

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

	Print				NYU L	utheran Medical Center - I	Project 3.a.i		
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.			In Process	Pass & Ongoing	N/A		
		En	ter Reviewer	Comment					
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		En	ter Reviewer	Comment					
	•	5. Co-locate primary care services at behavioral health sites.			In Process	Pass & Ongoing	N/A		
		Enter Reviewer Comment							
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125		
		Enter Reviewer Comment							
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.			In Process	Pass & Ongoing	N/A		
		En	ter 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		



Save & Return

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

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

	Data				NYU L	utheran Medical Center -	Project 3.a.		
3	Print								
		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	Fail	0		
		En	ter Reviewer	Comment					
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	Completed	Fail	0		
		En	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	Fail	0		
		En	ter Reviewer	Comment					
		13. Measure outcomes as required in the IMPACT Model.			In Process	Pass & Ongoing	N/A		
		En	ter 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		
		En	ter Reviewer	Comment					
		Total					0.63		

Domain 3 Pay for Performance and Pay for Reporting



N/A

0

1

0.5

n Achievement Value (AV) Scorecard DY2, Q4 January 1, 201	7 - March 31, 2017 (Payme Lutheran Medical Center -	
Measure	Reviewer Status	AVs Awarded
Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
P4P Measure DY2Q4		
t Medication Management - Effective Acute Phase Treatment	Fail	0
P4P Measure DY2Q4		
t Medication Management - Effective Continuation Phase Treatment	N/A	N/A
P4P Measure DY2Q4		

Achievement Value (AV) Scorecard DV2 OA January 1 2017 - March 31 2017 (Payment Quarter) i

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

Save & Return

Print



Save & Return Print

	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
	P4P Measure DY2Q4		
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
	P4R Measure DY2Q4		
	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
	P4R Measure DY2Q4		
_	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
	P4P Measure DY2Q4		
	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
	P4P Measure DY2Q4		
	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) $\pm$	Pass & Ongoing	1
	P4P Measure DY2Q4		
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	P4R Measure DY2Q4		
	Total		7.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 3.c.i

	Project Snapshot	Payment Snapshot	:	
Project Domain	Clinical Improvement Projects (Domain 3)	DY2 Q4 Payment Available	\$	766,034
Project ID	3.c.i	DY2 Q4 Payment Earned	\$	740,780
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)			

	3.c.i Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	60%					
Domain 1	Project Implementation Speed	Complete	1.00	0.50	50%			30%	353,554	328,300		
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal		7.00	6.50	93%	60%	30%	353,554	328,300			
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	9.9%	4.9%	58,926	58,926			
Domain 5	Domain 3 Pay for Performance (P4P)	complete	1.00	1.00	100%	30.1%	30.1%	353,554	353,554			
	Domain 2 Subtotal		6.00	6.00	100%	40%	35%	412,480	412,480			
	Total Complete		13.00	12.50	96%	100%	65%	766,034	740,780			

Total Project 3.c.i AVs Awarded: 12.5 out of 13

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

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

Enter Reviewer Comment								
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.50			
Enter Revie	ewer Commen	it		Pass & Ongoing Pass & Ongoing				
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1			
Enter Reviewer Comment								
Total					1.50			

	Domain 1 Project Prescribed Milestones - P	roject 3.c.i									
AV Driving	Project Requirement and Metric/Deliverable	CommittedMilestoneDue DateStatus		Reviewer Status	AVs Awarded						
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.			Pass & Ongoing	N/A						
	Enter Reviewer Comment										
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Completed	Pass & Ongoing	0.25						
	Enter Reviewer Comment										
•	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Completed	Fail	0.00						
	Enter Reviewer Comment										
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Fail	0.00						

NEW<br/>YORKDepartmentMedicaidSTATEof HealthRedesign Team

Save & Return

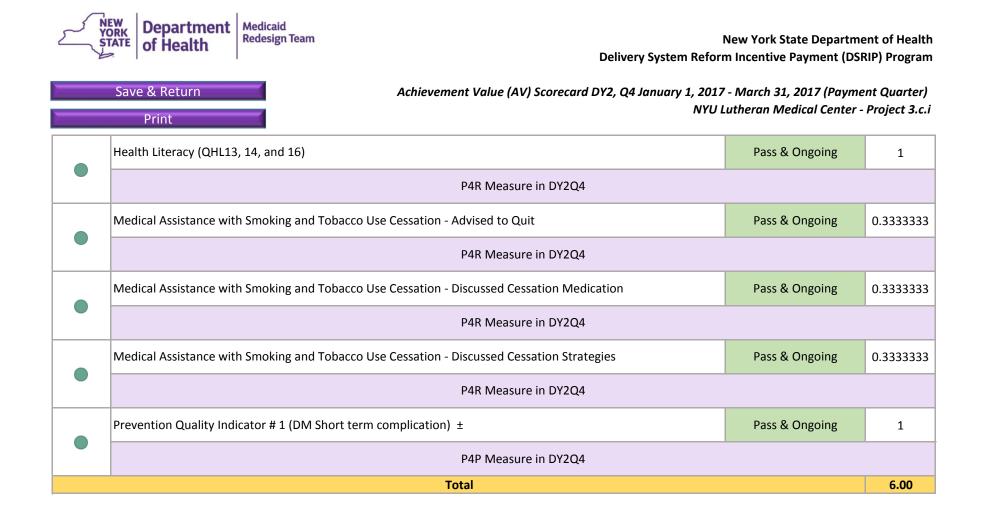
Print



Save & Return	
Print	

Enter Reviewer Comment									
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.									
Enter Reviewer Commen	nt								
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	0.25					
Enter Reviewer Comment									
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.			Pass & Ongoing	N/A					
Enter Reviewer Comment									
Total									

	Domain 3 Pay for Performance and Pay for Reporting								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) $\pm$	Pass & Ongoing	1						
	P4R Measure in DY2Q4								
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1						
	P4R Measure in DY2Q4								
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1						
	P4R Measure in DY2Q4		-						





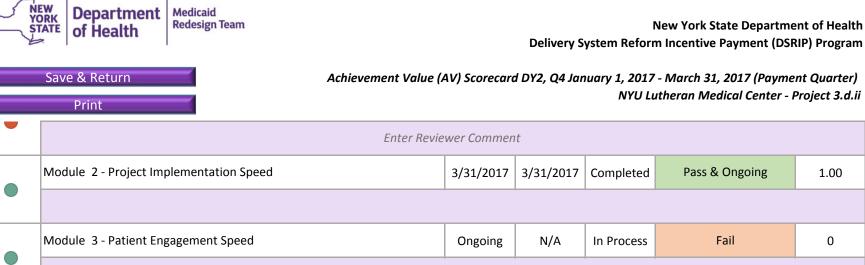
Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 3.d.ii

	Project Snapshot		Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)	D	DY2 Q4 Payment Available	\$ 793,067
Project ID	3.d.ii	D	Y2 Q4 Payment Earned	\$ 603,515
Project Title	Expansion of asthma home-based self- management program			

	3.d.ii Scoresheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)					
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%								
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%	366,031	313,741					
	Patient Engagement Speed	Complete	1.00	0.00	0%									
	Domain 1 Subtotal		7.00	6.00	86%	60%	30%	366,031	313,741					
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	9.9%	4.9%	61,005	61,005					
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	4.00	2.50	63%	30.1%	30.1%	366,031	228,769					
	Domain 3 Subtotal		8.00	6.50	81%	40%	35%	427,036	289,774					
	Total	Complete	15.00	12.50	83%	100%	65%	793,067	603,515					

Total Project 3.d.ii AVs Awarded: 12.5 out of 15

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



Department

Total

Enter Reviewer Comment

	Domain 1 Project Prescribed M	lilestones - Pi	roject 3.d.ii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
	<ol> <li>Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions.</li> <li>Specifically, change the patient's indoor environment to reduce exposure</li> </ol>	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20		
	Enter Reviewer Comment							
	3. Develop and implement evidence-based asthma management guidelines.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20		
	Enter Reviewer Comment							

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 3.d.ii

1.00

0

1.00

Fail



Save & Return       Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarte								
Print			NYU Li	ıtheran Medical Center - I	Project 3.d.ii			
4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20			
Enter Reviewer Comment								
5. Ensure coordinated care for asthma patients includes social services and support.			In Process	Pass & Ongoing	N/A			
Enter Reviewer Comment								
6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	0.20			
Enter Reviewer Comment								
7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	2		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	0.20			
Enter Reviewer Comment								
Total 1.								

	Domain 3 Pay for Performance and Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded



	Save & Return			
	Print	NYU Li	utheran Medical Center - F	Project 3.d.ii
	Asthma Medication Ratio (5 -	64 Years)	Fail	0
		P4P Measure DY2Q4		
	Medication Management for	People with Asthma (5 - 64 years) - 50% of Treatment days covered	Fail	0
		P4P Measure DY2Q4		
	Medication Management for	People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
		P4P Measure DY2Q4		
	Pediatric Quality Indicator #	14 Pediatric Asthma ±	Pass & Ongoing	1
•		P4P Measure DY2Q4		
	Prevention Quality Indicator	‡15 Younger Adult Asthma ±	Pass & Ongoing	1
		P4P Measure DY2Q4		
	Asthma Medication Ratio (5 -	64 Years)	Pass & Ongoing	1
		P4R Measure DY2Q4		



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 4.b.i

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

Paym	ent Snapshot	
DY2 Q4 Payment Available	\$	525,389
DY2 Q4 Payment Earned	\$	525,389

	4.b.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00 0%	0%	60% 30%	315,233	315,233	
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	60%	30%	315,233	315,233
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	40%	20%	210,156	210,156
Domain 4	Domain 4 Pay for Performance (P4P) N/A		N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			9.00	100%	40%	20%	210,156	210,156
	Total	Complete	14.00	14.00	100%	100%	50%	525,389	525,389

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

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



Save & Return
Print

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

NI YC ST	EW Department ATE of Health		New York State Departme n Incentive Payment (DSF	
	Save & Return Print	Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 NYU L	- March 31, 2017 (Payme utheran Medical Center -	-
	Age-adjusted preventa White non-Hispanics	ble hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1
		Enter Reviewer Comment		
Total				



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) NYU Lutheran Medical Center - Project 4.c.ii

Project Snapshot			Payment Snapshot				
<b>Project Domain</b>	Domain 4: Population-wide Projects: New York's	1	DY2 Q4 Payment Available		\$	434,141	
Project ID	4.c.ii	1	DY2 Q4 Payment Earned		\$	434,141	
Project Title	Increase early access to, and retention in, HIV care						

4.c.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			260,485	260,485
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	30%		
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal				100%	60%	30%	260,485	260,485
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	40%	20%	173,657	173,657
Domain 4	Domain 4 Pay for Performance (P4P) N/A		N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	40%	20%	173,657	173,657
Total Complete			16.00	16.00	100%	100%	50%	434,141	434,141

Total Project 4.c.ii AVs Awarded: 16 out of 16

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



S	Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017			
	Print	ıtheran Medical Center - I	Project 4.c	
		Enter Reviewer Comment		
N	Newly diagnosed HIV case ra	ite per 100,000	Pass & Ongoing	1
		Enter Reviewer Comment		
N	Newly diagnosed HIV case ra	te per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
		Enter Reviewer Comment		
N	Newly diagnosed HIV case ra	te per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
		Enter Reviewer Comment		
Р	Percentage of adults with he	ealth insurance - Aged 18- 64 years	Pass & Ongoing	1
		Enter Reviewer Comment		
Р	Percentage of premature dea	ath (before age 65 years)	Pass & Ongoing	1
		Enter Reviewer Comment		
Р	Percentage of premature dea	ath (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
		Enter Reviewer Comment		
Р	Percentage of premature dea	ath (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
		Enter Reviewer Comment		



	Save & Return	•••••••••••••••••••••••••••••••••••••••	rement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter				
	Print	NYU L	utheran Medical Center	Project 4.c.ii			
	Age-adjusted percentage of a	adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1			
		Enter Reviewer Comment					
•	Age-adjusted preventable ho	spitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1			
		Enter Reviewer Comment					
	Age-adjusted preventable ho White non-Hispanics	spitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1			
	Enter Reviewer Comment						
Total							