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

Print Summary

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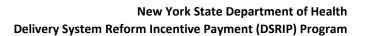*Achievement Value (AV) Scorecard*
Westchester Medical Center

PPS Information	
Quarter	DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
PPS	Westchester Medical Center
PPS Number	21

Achievement Value (AV) Scorecard Summary						
Project Link (click on the purple link below to access each individual project report)	**AV Data**				**Payment Data**	
	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	*Organizational funds are embedded within each project's payment*	
2.a.i	21.00	21.00	0.00	21.00	$ 3,290,448	$ 3,290,448
2.a.iii	22.00	22.00	0.00	22.00	$ 2,702,868	$ 2,702,868
2.a.iv	22.00	22.00	0.00	22.00	$ 3,172,932	$ 3,172,932
2.b.iv	22.00	22.00	0.00	22.00	$ 2,526,594	$ 2,526,594
2.d.i	11.00	10.00	0.00	10.00	$ 2,925,092	$ 2,674,370
3.a.i	16.00	11.00	0.00	11.00	$ 2,944,993	$ 1,974,116
3.a.ii	16.00	11.00	0.00	11.00	$ 2,826,260	$ 1,894,526
3.c.i	13.00	11.86	0.00	11.86	$ 2,291,562	$ 1,212,334
3.d.iii	15.00	11.50	0.00	11.50	$ 2,367,948	$ 1,528,757

New York State Department of Health — Medicaid Redesign Team

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Achievement Value (AV) Scorecard
Westchester Medical Center

4.b.i	14.00	14.00	0.00	14.00	$	1,351,434	$	1,351,434
4.b.ii	21.00	21.00	0.00	21.00	$	998,886	$	998,886
AV Adjustments (Column F)								
Total	**193.00**	**177.36**	**0.00**	**177.36**	**$**	**27,399,018**	**$**	**23,327,266**

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
Westchester Medical Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

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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	

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	●						
Additional Workforce Strategy Budget Updates (non AV-driving)	●	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	1
	●	2. Create a workforce transition roadmap for achieving defined target workforce	12/31/2016	N/A	Completed	Pass & Complete	
	●	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	3/31/2017	N/A	Completed	Pass & Complete	
	●	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	
	●	5. Develop training strategy	3/31/2017	N/A	Completed	Pass & Complete	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Additional Workforce Strategy Topic Areas	●						N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

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

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Quarterly Project Reports, Project Budget and Flow of Funds	●	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	1
	●	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
	●	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
	●	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 02 - Governance							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Governance Structure	●	1. Finalize governance structure and sub-committee structure	9/30/2016	N/A	Completed	Pass & Complete	
	●	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed	Pass & Complete	

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment
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Updates							1
	●	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete	
Governance Process Update	●	4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Additional Governance Milestones (non AV-driving)	●	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	6/30/2016	N/A	Completed	Pass & Complete	N/A
	●	6. Finalize partnership agreements or contracts with CBOs	3/31/2016	N/A	Completed	Pass & Complete	
	●	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	12/31/2016	N/A	Completed	Pass & Complete	
	●	8. Finalize workforce communication and engagement plan	3/31/2017	N/A	Completed	Pass & Complete	

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	●	9. Inclusion of CBOs in PPS Implementation	3/31/2016	N/A	Completed	Pass & Complete	
Additional Governance Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							1

Section 03 - Financial Sustainability

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

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	1
	●	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
	●	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	
	●	4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	

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

Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Cultural Competency /Health Literacy	🟢	1. Finalize cultural competency / health literacy strategy.	12/31/2015	N/A	Completed	Pass & Complete	1
	🔴	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	

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Additional Cultural Competency /Health Literacy Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							1

Section 05 - IT Systems and Processes							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded

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IT Systems and Processes	●	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).	12/31/2016	N/A	Complete	Pass & Complete	N/A
	●	2. Develop an IT Change Management Strategy.	12/31/2016	N/A	Complete	Pass & Complete	
	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2016	N/A	Complete	Pass & Complete	
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	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	

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Additional IT Systems and Processes Topic Areas	●						N/A
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 06 - Performance Reporting							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performance Reporting	●	1. Establish reporting structure for PPS-wide performance reporting and communication.	9/30/2016	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.	6/30/2016	N/A	Completed	Pass & Complete	N/A

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Additional Performance Reporting Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 07 - Practitioner Engagement							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
	🔴	1. Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Completed	Pass & Complete	

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Practitioner Engagement	●	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	6/30/2016	N/A	Completed	Pass & Complete	N/A
Additional Practitioner Engagement Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

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				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	🔴	1. Develop population health management roadmap.	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	N/A
Additional Population Health Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	

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

Total	**0**

Section 09 - Clinical Integration						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Clinical Integration	●	1. Perform a clinical integration 'needs assessment'.	12/31/2016	N/A	Completed	Pass & Complete	N/A
	●	2. Develop a Clinical Integration strategy.	12/31/2016	N/A	Completed	Pass & Complete	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	

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Additional Clinical Integration Topic Areas						N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total						**0**

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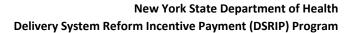*Westchester Medical Center AV Adjustments*

AV Adjustment Scoresheet								
Adjustment	AVs Per Project	Total Projects Selected	Total AVs Available	Total AVs Awarded		Adjusted AVs	Net AVs Awarded	
				Net Awarded	Percentage AV		Net Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	138.00	122.36	89%	0.00	122.36	89%
Total			**193.00**	**177.36**	**92%**	**0.00**	**177.36**	**92%**

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☐ Organizational   ☐ Project Adjustments

No AV Adjustments
●   *Please note that there are no AV adjustments for Westchester Medical Center in DY2, Q1*

●

New York State Department of Health
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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 2.a.i

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

Payment Snapshot		
DY2 Q4 Payment Available	$	3,290,448
DY2 Q4 Payment Earned	$	3,290,448

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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,974,269	1,974,269
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		**6.00**	**6.00**	**100%**	**60%**	**30%**	**1,974,269**	**1,974,269**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	1,316,179	1,316,179
	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%**	**1,316,179**	**1,316,179**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**50%**	**3,290,448**	**3,290,448**

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

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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					

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

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

Domain 1 Project Prescribed Milestones - Project 2.a.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	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 Reviewer Comment				
●	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.			In Process	Pass & Ongoing	N/A
		Enter Reviewer Comment				
●	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 Reviewer Comment				
●	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 Reviewer Comment				
●	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 Reviewer Comment				
●	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				

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●	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 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		

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)
Westchester Medical Center - Project 2.a.i

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	Metric	Status	AV
●	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

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	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		

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

●	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**

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

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iii
Project Title	Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access

Payment Snapshot		
DY2 Q4 Payment Available	$	2,702,868
DY2 Q4 Payment Earned	$	2,702,868

2.a.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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,621,721	1,621,721
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**7.00**	**100%**	**60%**	**30%**	**1,621,721**	**1,621,721**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	1,081,147	1,081,147
	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%**	**1,081,147**	**1,081,147**
Total		**Complete**	**22.00**	**22.00**	**100%**	**100%**	**50%**	**2,702,868**	**2,702,868**

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

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.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	Completed	Pass & Ongoing	N/A

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)
Westchester Medical Center - Project 2.a.iii

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

Domain 1 Project Prescribed Milestones - Project 2.a.iii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25
	Enter Reviewer Comment					
●	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.			In Process	Pass & Ongoing	N/A

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)
Westchester Medical Center - Project 2.a.iii

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		Enter Reviewer Comment				
●	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.			In Process	Pass & Ongoing	N/A
		Enter Reviewer Comment				
●	5. 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 Reviewer Comment				
●	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.			Completed	Pass & Complete	N/A
		Enter Reviewer Comment				
●	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25
		Enter Reviewer Comment				
●	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25
		Enter Reviewer Comment				
●	9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25

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)
Westchester Medical Center - Project 2.a.iii

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| | *Enter Reviewer Comment* | |
| **Total** | | **1.00** |

| **Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.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		
●	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

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)
Westchester Medical Center - Project 2.a.iii

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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		
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

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)
Westchester Medical Center - Project 2.a.iii

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	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		
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		

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)
Westchester Medical Center - Project 2.a.iii

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●	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)
Westchester Medical Center - Project 2.a.iv

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iv
Project Title	Create a medical village using existing hospital infrastructure

Payment Snapshot		
DY2 Q4 Payment Available	$	3,172,932
DY2 Q4 Payment Earned	$	3,172,932

2.a.iv Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY2)**	**Domain Funding % (DY2, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,903,759	1,903,759
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**7.00**	**100%**	**60%**	**30%**	**1,903,759**	**1,903,759**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	1,269,173	1,269,173
	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%**	**1,269,173**	**1,269,173**
	Total	**Complete**	**22.00**	**22.00**	**100%**	**100%**	**50%**	**3,172,932**	**3,172,932**

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

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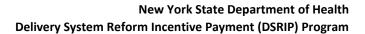| Domain 1 Project Milestones - Project 2.a.iv						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process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

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)
Westchester Medical Center - Project 2.a.iv

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

Domain 1 Project Prescribed Milestones - Project 2.a.iv						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Convert outdated or unneeded hospital capacity into an outpatient services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
🟢	2. Provide a detailed timeline documenting the specifics of bed reduction and rationale. Specified bed reduction proposed in the project must include active or "staffed" beds.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33
	Enter Reviewer Comment					
🟢	3. Ensure that all participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					

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)
Westchester Medical Center - Project 2.a.iv

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●	4. Ensure that all safety net providers participating in Medical Villages 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.			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	0.33
	Enter Reviewer Comment					
●	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33
	Enter Reviewer Comment					
Total						**1.00**

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

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)
Westchester Medical Center - Project 2.a.iv

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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		

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●	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

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)
Westchester Medical Center - Project 2.a.iv

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

Payment Snapshot		
DY2 Q4 Payment Available	$	2,526,594
DY2 Q4 Payment Earned	$	2,526,594

2.b.iv Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,515,957	1,515,957
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**7.00**	**100%**	**60%**	**30%**	**1,515,957**	**1,515,957**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	1,010,638	1,010,638
	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%**	**1,010,638**	**1,010,638**
Total		**Complete**	**22.00**	**22.00**	**100%**	**100%**	**50%**	**2,526,594**	**2,526,594**

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

Hide Reviewer Comments

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

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)
Westchester Medical Center - Project 2.b.iv

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	Enter Reviewer Comment					
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	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.b.iv						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.			In Process	Pass & Ongoing	N/A
	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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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 2.b.iv

●	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	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 Reviewer Comment					
●	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	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 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		

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)
Westchester Medical Center - Project 2.b.iv

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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

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)
Westchester Medical Center - Project 2.b.iv

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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)
Westchester Medical Center - Project 2.d.i

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

Payment Snapshot		
DY2 Q4 Payment Available	$	2,925,092
DY2 Q4 Payment Earned	$	-

2.d.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%				
	Project Implementation Speed	Complete	1.00	1.00	100%	60%	30%	1,755,055	1,504,332.85
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**7.00**	**6.00**	**86%**	**60%**	**30%**	**1,755,055**	**1,504,333**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	40%	20%	1,170,037	1,170,036.66
	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%**	**1,170,037**	**1,170,037**
Total		**Complete**	**11.00**	**10.00**	**91%**	**100%**	**50%**	**2,925,092**	**2,674,370**

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

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

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Westchester Medical Center - Project 2.d.i

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	Enter Reviewer Comment					
●	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	1.00
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.d.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	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	0.059
	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	0.059
	Enter Reviewer Comment					

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Westchester Medical Center - Project 2.d.i

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●	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
●	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	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 his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	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 improvement, must be set for each cohort at the beginning of each performance period.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
●	8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
●	9. Measure PAM® components	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
●	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059

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Westchester Medical Center - Project 2.d.i

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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.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
	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	0.059
	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	0.059
	Enter Reviewer Comment					
	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	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					

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Westchester Medical Center - Project 2.d.i

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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	0.059
●						
	Enter Reviewer Comment					
Total						**1.00**

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

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

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)
Westchester Medical Center - Project 3.a.i

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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	$	2,944,993
DY2 Q4 Payment Earned	$	1,974,116

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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,359,228	1,359,228
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**7.00**	**100%**	**60%**	**30%**	**1,359,228**	**1,359,228**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	4.9%	226,538	226,538
	Domain 3 Pay for Performance		7.00	2.00	29%	30.1%	30.1%	1,359,228	388,351
Domain 3 Subtotal			**9.00**	**4.00**	**44%**	**40%**	**35%**	**1,585,765**	**614,889**
Total		**Complete**	**16.00**	**11.00**	**69%**	**100%**	**65%**	**2,944,993**	**1,974,116**

Total Project 3.a.i AVs Awarded: 11 out of 16

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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

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Westchester Medical Center - Project 3.a.i

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

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3						
☑ 3.a.i Model 1　　☑ 3.a.i Model 2　　☑ 3.a.i Model 3						
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
		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		*Enter Reviewer Comment*					

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	●	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					
	●	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					
3.a.i Model 2	●	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					
	●	7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.			In Process	Pass & Ongoing	N/A
		Enter Reviewer Comment					
	●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
		Enter Reviewer Comment					
	●	9. Implement IMPACT Model at Primary Care Sites.			In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
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		Enter Reviewer Comment					
3.a.i Model 3		10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
		Enter Reviewer Comment					
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125
		Enter Reviewer Comment					
		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
		Enter 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

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

AV Driving	Measure	Reviewer Status	AVs Awarded
●	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
	P4P Measure DY2Q4		
●	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	P4P Measure DY2Q4		
●	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	P4P Measure DY2Q4		
●	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	P4P Measure DY2Q4		
●	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	P4P Measure DY2Q4		
●	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
	P4P Measure DY2Q4		
●	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
	P4P Measure DY2Q4		

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

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	Measure	Status	AV
●	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
	P4P Measure DY2Q4		
●	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	P4R Measure DY2Q4		
Total			**4.00**

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

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.a.ii
Project Title	Behavioral health community crisis stabilization services

Payment Snapshot		
DY2 Q4 Payment Available	$	2,826,260
DY2 Q4 Payment Earned	$	1,894,526

3.a.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY2)**	**Domain Funding % (DY2, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,304,428	1,304,428
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**7.00**	**100%**	**60%**	**30%**	**1,304,428**	**1,304,428**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	20%	217,405	217,405
	Domain 3 Pay for Performance (P4P)		7.00	2.00	29%	30.1%	0%	1,304,428	372,694
Domain 2 Subtotal			**9.00**	**4.00**	**44%**	**40%**	**20%**	**1,521,832**	**590,098**
Total		**Complete**	**16.00**	**11.00**	**69%**	**100%**	**50%**	**2,826,260**	**1,894,526**

Total Project 3.a.ii AVs Awarded: 11 out of 16

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

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Westchester Medical Center - Project 3.a.ii

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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	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						**2.00**

Domain 1 Project Prescribed Milestones - Project 3.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs 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 Reviewer Comment					
	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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Westchester Medical Center - Project 3.a.ii

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	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 Reviewer Comment					
	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

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Westchester Medical Center - Project 3.a.ii

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	Enter Reviewer Comment					
	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25
	Enter Reviewer Comment					
Total						**1.00**

Domain 3 Pay for Performance and Pay for Reporting		
AV Driving	**Measure**	**Reviewer Status** / **AVs Awarded**
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail — 0
	P4P Measure DY2Q4	
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail — 0
	P4P Measure DY2Q4	
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail — 0
	P4P Measure DY2Q4	
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A — N/A
	P4P Measure DY2Q4	
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing — 1
	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

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

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	P4P Measure DY2Q4		
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	P4R Measure DY2Q4		
	Total		**4.00**

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

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

Payment Snapshot		
DY2 Q4 Payment Available	$	1,436,090
DY2 Q4 Payment Earned	$	1,212,334

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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,057,644	1,036,060
	Project Implementation Speed	Complete	1.00	0.86	86%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.86**	**98%**	**60%**	**30%**	**1,057,644**	**1,036,060**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	9.9%	4.9%	176,274	176,274
	Domain 3 Pay for Performance (P4P)		1.00	0.00	0%	30.1%	30.1%	1,057,644	-
	Domain 2 Subtotal		**6.00**	**5.00**	**83%**	**40%**	**35%**	**1,233,918**	**176,274**
Total		**Complete**	**13.00**	**11.86**	**91%**	**100%**	**65%**	**2,291,562**	**1,212,334**

Total Project 3.c.i AVs Awarded: 11.86 out of 13

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

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		Enter Reviewer Comment				
●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.86
		Enter Reviewer Comment				
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
		Enter Reviewer Comment				
Total						**1.86**

Domain 1 Project Prescribed Milestones - Project 3.c.i					
AV Driving	**Project Requirement and Metric/Deliverable**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	Completed	Pass & Complete	0.14
	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 & Complete	0.14
	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	Pass & Complete	0.14
	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	Pass & Complete	0.14

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

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	Enter Reviewer Comment				
	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	Completed	Pass & Complete	0.14
	Enter Reviewer Comment				
	6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	0.14
	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.	3/31/2017	Completed	Fail	0.00
	Enter Reviewer Comment				
Total					**0.86**

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%) ±	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		

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●	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
	P4R Measure in DY2Q4		
●	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	P4R Measure in DY2Q4		
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
	P4R Measure in DY2Q4		
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
	P4R Measure in DY2Q4		
●	Prevention Quality Indicator # 1 (DM Short term complication) ±	Fail	0
	P4P Measure in DY2Q4		
Total			**5.00**

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

Payment Snapshot		
DY2 Q4 Payment Available	$	2,367,948
DY2 Q4 Payment Earned	$	1,528,757

3.d.iii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY2)**	**Domain Funding % (DY2, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,092,899	936,770
	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**7.00**	**6.00**	**86%**	**60%**	**30%**	**1,092,899**	**936,770**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	9.9%	4.9%	182,150	182,150
	Domain 3 Pay for Performance (P4P)		4.00	1.50	38%	30.1%	30.1%	1,092,899	409,837
	Domain 2 Subtotal		**8.00**	**5.50**	**69%**	**40%**	**35%**	**1,275,049**	**591,987**
	Total	**Complete**	**15.00**	**11.50**	**77%**	**100%**	**65%**	**2,367,948**	**1,528,757**

Total Project 3.d.iii AVs Awarded: 11.5 out of 15

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Domain 1 Project Milestones - Project 3.d.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

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Westchester Medical Center - Project 3.d.iii

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	Enter Reviewer Comment					
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	1.00
	Enter Reviewer Comment					
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 3.d.iii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					

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●	4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
Total						**1.00**

Domain 3 Pay for Performance and Pay for Reporting			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
	P4P Measure DY2Q4		
●	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5
	P4P Measure DY2Q4		
●	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Fail	0
	P4P Measure DY2Q4		
●	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1
	P4P Measure DY2Q4		
●	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1

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Westchester Medical Center - Project 3.d.iii

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

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 4.b.i

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

Payment Snapshot		
DY2 Q4 Payment Available	$	1,351,434
DY2 Q4 Payment Earned	$	1,351,434

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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	810,860	810,860
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**60%**	**30%**	**810,860**	**810,860**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	40%	20%	540,574	540,574
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			**9.00**	**9.00**	**100%**	**40%**	**20%**	**540,574**	**540,574**
Total		**Complete**	**14.00**	**14.00**	**100%**	**100%**	**50%**	**1,351,434**	**1,351,434**

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

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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

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 4.b.i

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	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		

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

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 4.b.ii

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

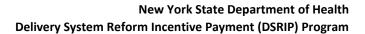| Payment Snapshot		
DY2 Q4 Payment Available	$	998,886
DY2 Q4 Payment Earned	$	998,886

4.b.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	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	599,332	599,332
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**60%**	**30%**	**599,332**	**599,332**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	16.00	16.00	100%	40%	20%	399,554	399,554
	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%**	**399,554**	**399,554**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**50%**	**998,886**	**998,886**

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 Awarded
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1

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)
Westchester Medical Center - Project 4.b.ii

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	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		
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		

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)
Westchester Medical Center - Project 4.b.ii

●	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 White non-Hispanics	Pass & Ongoing	1

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Westchester Medical Center - Project 4.b.ii

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Total	16.00