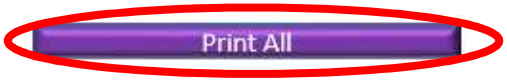
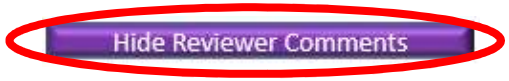
**New York State Department of Health**
**Delivery System Reform Incentive Payment (DSRIP) Program**

***Achievement Value (AV) Scorecard***
***Better Health for Northeast New York***

| General Instructions | | |
|---|---|---|
| **Step** | **Description/Link** | **Image** |
| 1. Enable Content | Click "Enable Content" at the top of the screen to enable macros. |   |
| 2. Review AV Scorecard Overview | The AV scorecard Overview is a summary of the report | Click to Access AV Scorecard Overview |

| Functionality | | |
|---|---|---|
| **Step** | **Description/Link** | **Image** |
| 1. Print | All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports. |   |
| 2. Access Detailed Project Reports and return to AV Scorecard Overview | The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview |   |
| 3. Show or Hide reviewer comments | Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments. |   |

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

Print Summary

Print All

***Achievement Value (AV) Scorecard***
***Better Health for Northeast New York***

| PPS Information | |
|---|---|
| Quarter | DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) |
| PPS | Better Health for Northeast New York |
| PPS Number | 1 |

**Achievement Value (AV) Scorecard Summary**

| | | | | | | |
|---|---|---|---|---|---|---|
| Domain I Organizational (All Projects) | 5.00 | 5.00 | 0.00 | 5.00 | *Organizational funds are embedded within each project's payment* | |
| 2.a.iii | 29.00 | 23.50 | 0.00 | 23.50 | $ 1,754,794 | $ 985,609 |
| 2.a.v | 29.00 | 23.50 | 0.00 | 23.50 | $ 1,677,763 | $ 942,344 |
| 2.b.iii | 29.00 | 23.50 | 0.00 | 23.50 | $ 1,582,185 | $ 888,661 |
| 2.d.i | 14.00 | 11.00 | 0.00 | 11.00 | $ 1,450,096 | $ 879,725 |
| 3.a.i | 15.00 | 8.50 | 0.00 | 8.50 | $ 1,429,832 | $ 595,763 |
| 3.a.ii | 15.00 | 8.50 | 0.00 | 8.50 | $ 1,358,370 | $ 565,988 |
| 3.b.i | 14.00 | 13.00 | 0.00 | 13.00 | $ 333,608 | $ 296,540 |
| 3.d.iii | 12.00 | 10.00 | 0.00 | 10.00 | $ 1,150,804 | $ 709,662 |
| 4.b.i | 22.00 | 22.00 | 0.00 | 22.00 | $ 867,496 | $ 867,496 |

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***Achievement Value (AV) Scorecard***
***Better Health for Northeast New York***

| | | | | | | |
|---|---|---|---|---|---|---|
| 4.b.ii | 22.00 | 22.00 | 0.00 | 22.00 | $ 679,046 | $ 679,046 |
| AV Adjustments (Column F) | | | | | | |
| **Total** | **229.00** | **189.00** | **0.00** | **189.00** | **$ 14,501,418** | **$ 8,730,201** |

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**Delivery System Reform Incentive Payment (DSRIP) Program**

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment***
***Better Health for Northeast New York - Domain 1 Organizational AVs***

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

| Workforce Strategy | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Process Measure** | **AV Driving** | **Milestone** | **Required Due Date** | **Committed Due Date** | **Milestone Status** | **Reviewer Status** | **AV Awarded** |
| Workforce Strategy Budget Updates | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Additional | | 1. Define target workforce state (in line with DSRIP program's goals) | N/A | N/A | Completed | | |
| | | 2. Create a workforce transition roadmap for achieving defined target workforce | N/A | N/A | Completed | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Workforce Strategy Budget Updates (non AV-driving) | | 3. Perform detailed gap analysis between current state assessment of workforce and projected future state | N/A | N/A | Completed | | N/A |
| | | 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 | N/A | N/A | Completed | | |
| | | 5. Develop training strategy | N/A | N/A | Completed | | |
| Additional Workforce Strategy Topic Areas | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | | N/A |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | | |
| | | Roles and Responsibilities | N/A | N/A | In Process | | |
| | | Key Stakeholders | N/A | N/A | In Process | | |
| | | IT Expectations | N/A | N/A | In Process | | |
| | | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |

**Section 01 - Budget**

| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
|---|---|---|---|---|---|---|---|
| Quarterly Project Reports, | | Module 1.1 - PPS Budget Report (Baseline) | Ongoing | N/A | Completed | | |
| | | Module 1.2 - PPS Budget Report (Quarterly | Ongoing | N/A | In Process | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment***
***Better Health for Northeast New York - Domain 1 Organizational AVs***

| | | | | | | |
|---|---|---|---|---|---|---|
| Project Budget and | | Module 1.3 - PPS Flow of Funds (Baseline) | Ongoing | N/A | Completed | |
| | | Quarterly Progress Reports | N/A | N/A | In Process | |

| Section 02 - Governance | | | | | | |
|---|---|---|---|---|---|---|
| Governance Structure Updates | | 1. Finalize governance structure and sub-committee structure | 9/30/2015 | 9/30/2015 | Completed | |
| | | 2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project | 12/31/2015 | 12/31/2015 | Completed | |
| | | 3. Finalize bylaws and policies or Committee Guidelines where applicable | 9/30/2015 | 9/30/2015 | Completed | |
| Governance Process | | 4. Establish governance structure reporting and monitoring processes | 9/30/2016 | 12/31/2015 | Completed | |
| 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, | N/A | 9/30/2015 | Completed | |
| | | 6. Finalize partnership agreements or contracts with CBOs | N/A | 12/31/2016 | In Process | |
| | | 7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and | N/A | 6/30/2016 | In Process | |
| | | 8. Finalize workforce communication and engagement plan | N/A | 3/31/2016 | Completed | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment***
***Better Health for Northeast New York - Domain 1 Organizational AVs***

| | | | | | | |
|---|---|---|---|---|---|---|
| | | 9. Inclusion of CBOs in PPS Implementation | N/A | 3/31/2017 | Completed | |
| Additional Governance Topic Areas | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | |
| | | Roles and Responsibilities | N/A | N/A | In Process | |
| | | Key Stakeholders | N/A | N/A | In Process | |
| | | IT Expectations | N/A | N/A | In Process | |
| | | Progress Reporting | N/A | N/A | In Process | |

**Section 03 - Financial Sustainability**

| | | | | | | |
|---|---|---|---|---|---|---|
| Financial Stability Update | | 1. Finalize PPS finance structure, including reporting structure | 12/31/2015 | 12/31/2015 | Completed | |
| | | 2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues. | | 12/31/2015 | Completed | |
| | | 3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d | 12/31/2015 | 12/31/2015 | Completed | |
| | | | | | | 1 |
| | | 4. Develop a Value Based Needs Assessment ("VNA") | 3/31/2017 | 3/31/2017 | Completed | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | ● | 5. Develop an implementation plan geared towards addressing the needs identified within your VNA | 6/30/2017 | 6/30/2017 | Completed | Pass & Ongoing | |
| | | | | | | | |
| Additional Financial Stability 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 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 | 12/31/2015 | 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 | 6/30/2016 | Completed | Pass & Complete | |
| Additional | ● | 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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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment***
***Better Health for Northeast New York - Domain 1 Organizational AVs***

| | | | | | | |
|---|---|---|---|---|---|---|
| Cultural Competency /Health Literacy Topic Areas | | 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 | |
| | | Progress Reporting | N/A | | | Pass & Ongoing |

**Section 05 - IT Systems and Processes**

| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
|---|---|---|---|---|---|---|---|
| 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). | 9/30/2016 | 12/31/2015 | Completed | Pass & Complete | |
| | | 2. Develop an IT Change Management Strategy. | 9/30/2016 | 3/31/2016 | Completed | | |
| | | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network | N/A | | | Pass & Complete | |
| | | 4. Develop a specific plan for engaging attributed members in Qualifying Entities | N/A | | | Pass & Complete | |
| | | 5. Develop a data security and confidentiality plan. | N/A | | | Pass & Complete | |
| Additional IT Systems and Processes | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | | | Pass & Ongoing | |
| | | Major Dependencies on Organizational Workstreams | N/A | | | Pass & Ongoing | |
| | | Roles and Responsibilities | N/A | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| Topic Areas | | Key Stakeholders | N/A | N/A | In Process | |
| | | Progress Reporting | N/A | N/A | In Process | |

## Section 06 - Performance Reporting

| | | | | | | |
|---|---|---|---|---|---|---|
| Performance Reporting | | 1. Establish reporting structure for PPS-wide performance reporting and communication. | 6/30/2016 | 3/31/2016 | Completed | |
| | | 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting. | 6/30/2016 | 6/30/2016 | Completed | |
| Additional Performance Reporting Topic Areas | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | |
| | | Roles and Responsibilities | N/A | N/A | In Process | |
| | | Key Stakeholders | N/A | N/A | In Process | |
| | | IT Expectations | N/A | N/A | In Process | |
| | | Progress Reporting | N/A | N/A | In Process | |

## Section 07 - Practitioner Engagement

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***Better Health for Northeast New York - Domain 1 Organizational AVs***

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Practitioner Engagement | ● | 1. Develop Practitioners communication and engagement plan. | 9/30/2015 | 3/31/2016 | Completed | Pass & Complete | |
| | ● | 2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. | N/A | 12/31/2015 | Completed | Pass & Complete | |
| Additional Practitioner Engagement Topic Areas | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | | | Pass & Ongoing | |
| | ● | Major Dependencies on Organizational Workstreams | N/A | | | Pass & Ongoing | |
| | ● | Roles and Responsibilities | N/A | | | Pass & Ongoing | |
| | ● | Key Stakeholders | N/A | | | Pass & Ongoing | |
| | ● | IT Expectations | N/A | | | Pass & Ongoing | |
| | ● | Progress Reporting | N/A | | | Pass & Ongoing | |
| **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 | 6/30/2016 | Complete | Pass & Complete | |
| | ● | 2. Finalize PPS-wide bed reduction plan. | N/A | 3/31/2017 | Complete | | |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | | | Pass & Ongoing | |
| | ● | Major Dependencies on Organizational Workstreams | N/A | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| Additional Population Health Topic Areas | | Roles and Responsibilities | N/A | N/A | In Process | |
| | | Key Stakeholders | N/A | N/A | In Process | |
| | | IT Expectations | N/A | N/A | In Process | |
| | | Progress Reporting | N/A | N/A | In Process | |

**Section 09 - Clinical Integration**

| | | | | | | |
|---|---|---|---|---|---|---|
| Clinical | | 1. Perform a clinical integration 'needs assessment'. | 6/30/216 | 12/31/2016 | Completed | |
| Additional Clinical Integration Topic Areas | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | |
| | | Roles and Responsibilities | N/A | N/A | In Process | |
| | | Key Stakeholders | N/A | N/A | In Process | |
| | | IT Expectations | N/A | N/A | In Process | |
| | | Progress Reporting | N/A | N/A | In Process | |

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**Delivery System Reform Incentive Payment (DSRIP) Program**

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York 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 | 174.00 | 134.00 | 77% | 0.00 | 134.00 | 77% |
| **Total** | | | **229.00** | **189.00** | **83%** | **0.00** | **189.00** | **83%** |

Hide Reviewer Comments

☐ Organizational ☐ Project Adjustments

| No AV Adjustments | |
|---|---|
| | *Please note that there are no AV adjustments for Better Health for Northeast New York in DY2, Q1* |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

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

**Payment Snapshot**

**2.a.i Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 443,485 | 443,485 |
| | 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%** | **20%** | **20%** | **443,485** | **443,485** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 8% | 8% | 177,394 | 177,394 |
| | Domain 2 Pay for Performance (P4P) | Complete | 8.00 | 3.50 | 44% | 72% | 72% | 1,596,546 | 698,489 |

**Domain 1 Project Milestones Project 2.a.i**

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

| | | |
|---|---|---|
| | *Enter Reviewer Comment* | |
| **Total** | | **0.00** |

| **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. | 9/30/2016 | 9/30/2016 | Completed | N/A | 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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.a.i*

| | | | | | | |
|---|---|---|---|---|---|---|
| | *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. | 9/30/2016 | 9/30/2016 | Completed | N/A | 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. | 9/30/2016 | 9/30/2016 | Completed | N/A | 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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

**Domain 2 Pay for Performance and Pay for Reporting - Project**

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

| 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* | | |
| ● | | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |

Save & Return

Print

***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

| | | | |
|---|---|---|---|
| | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | 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* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

| | |
|---|---|
| | 1 |
| | 1 |
| | 0.5 |
| | 0.5 |

| Domain 2 Pay for Performance - Project 2.a.i | |
|---|---|
| Adult Access to Preventive or Ambulatory Care - 20 to 44 years | 0 |
| | 0 |
| | 0 |
| | 1 |
| | 0 |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.i***

| | | | |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| **Total** | | | **3.50** |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.iii***

| 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 | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,754,794 |
| **DY4, Q2 Payment Earned** | $ | 985,609 |

**2.a.iii Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 350,959 | 292,466 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **350,959** | **292,466** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 8% | 8% | 140,384 | 140,384 |
| | Domain 2 Pay for Performance (P4P) | Complete | 8.00 | 3.50 | 44% | 72% | 72% | 1,263,452 | 552,760 |
| **Domain 2 Subtotal** | | | **23.00** | **18.50** | **80%** | **80%** | **80%** | **1,403,835** | **693,144** |
| **Total** | | **Complete** | **29.00** | **23.50** | **81%** | **100%** | **100%** | **1,754,794** | **985,609** |

**Total Project 2.a.iii AVs Awarded: 23.5 out of 29**

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 | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| **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 | N/A |
| | *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. | 3/31/2017 | 3/31/2017 | Completed | Fail | 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. | 3/31/2017 | 3/31/2017 | Completed | Fail | N/A |
| | *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. | 3/31/2017 | 3/31/2017 | Completed | Fail | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | *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. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | 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. | 3/31/2017 | 3/31/2017 | 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 | Fail | N/A |
| | *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 | Fail | N/A |
| | *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 | N/A |
| | *Enter Reviewer Comment* | | | | | |

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

Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.a.iii*

| | | | |
|---|---|---|---|
| | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | |

Save & Return

Print

***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.iii***

| | | | |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | 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* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |

Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.a.iii*

| | | | |
|---|---|---|---|
| | Potentially Avoidable Readmissions | | 1 |
| | | | 1 |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |

| Domain 2 Pay for Performance Project 2.a.iii | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 1 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |

Save & Return

Print

***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.iii***

| | | | |
|---|---|---|---|
| | Children's Access to Primary Care- 12 to 24 months | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **3.50** |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.v***

| Project Snapshot | |
|---|---|
| | |
| | |

| Payment Snapshot | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,677,763 |
| **DY4, Q2 Payment Earned** | $ | 942,344 |

**2.a.v Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 335,553 | 279,627 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **335,553** | **279,627** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 8% | 8% | 134,221 | 134,221 |
| | Domain 2 Pay for Performance (P4P) | Complete | 8.00 | 3.50 | 44% | 72% | 72% | 1,207,989 | 528,495 |
| **Domain 2 Subtotal** | | | **23.00** | **18.50** | **80%** | **80%** | **80%** | **1,342,211** | **662,716** |
| **Total** | | **Complete** | **29.00** | **23.50** | **81%** | **100%** | **100%** | **1,677,763** | **942,344** |

**Total Project 2.a.v AVs Awarded: 23.5 out of 29**

Hide Reviewer Comments

| Domain 1 Project Milestones Project 2.a.v | | | | | | |
|---|---|---|---|---|---|---|
| **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 |
| | *Enter Reviewer Comment* | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| | **Total** | | | | | **0.00** |

| **Domain 1 Project Prescribed Milestones - Project 2.a.v** | | | | | | |
|---|---|---|---|---|---|---|
| **AV Driving** | **Project Requirement and Metric/Deliverable** | **Required Due Date** | **Committed Due Date** | **Milestone Status** | **Reviewer Status** | **AVs Awarded** |
| | 1. Transform outdated (underperforming) nursing home capacity into a stand-alone emergency department/urgent care center or other healthcare-related purpose. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Provide a clear statement of how the infrastructure transformation program will promote better service and outcomes (service volume, occupancy statistics, etc.) for the community based upon the community needs assessment including, evaluation of specific planning needs for any Naturally Occurring Retirement Community (NORC) occurring within the PPS. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 3. Provide a clear description of how this re-configured facility will fit into a broader integrated delivery system that is committed to high quality care and willing/able to participate in payment reform. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 4. Provide clear documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.a.v*

| | | | | | | |
|---|---|---|---|---|---|---|
| | *Enter Reviewer Comment* | | | | | |
| | 5. Identify specific community-based services that will be developed in lieu of these beds based upon the community need. | 3/31/2017 | 3/31/2017 | Completed | | N/A |
| | | | | | | |
| | | | | | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 7. 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. | 3/31/2018 | 3/31/2018 | Completed | Fail | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 8. 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. | 3/31/2018 | 3/31/2018 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 9. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2 | 3/31/2018 | 3/31/2018 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |

| Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.v | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | |

Save & Return

Print

***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.v***

| | | |
|---|---|---|
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.3333333 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.3333333 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |

Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.a.v*

| | | | |
|---|---|---|---|
| | H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | 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* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | |

Save & Return

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.v***

| | | | |
|---|---|---|---|
| | | | |
| | | | 1 |
| | | | |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |
| | | | |

| Domain 2 Pay for Performance Project | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 1 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | | | |

Save & Return

Print

***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.a.v***

| | | | |
|---|---|---|---|
| | Children's Access to Primary Care- 25 months to 6 years | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **3.50** |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.b.iii***

| Project Snapshot | |
|---|---|
| | |
| | |

| Payment Snapshot | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,582,185 |
| **DY4, Q2 Payment Earned** | $ | 888,661 |

**2.b.iii Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 316,437 | 263,697 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **316,437** | **263,697** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 8% | 8% | 126,575 | 126,575 |
| | Domain 2 Pay for Performance (P4P) | Complete | 8.00 | 3.50 | 44% | 72% | 72% | 1,139,173 | 498,388 |
| **Domain 2 Subtotal** | | | **23.00** | **18.50** | **80%** | **80%** | **80%** | **1,265,748** | **624,963** |
| **Total** | | **Complete** | **29.00** | **23.50** | **81%** | **100%** | **100%** | **1,582,185** | **888,661** |

**Total Project 2.b.iii AVs Awarded: 23.5 out of 29**

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 |
| | *Enter Reviewer Comment* | | | | | |

Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.b.iii*

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | 9/30/2016 | 9/30/2016 | Completed | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| **Domain 1 Project Prescribed Milestones - Project 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 | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.<br>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.<br>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | 3. For patients presenting with minor illnesses who do not have a primary care provider:<br>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.<br>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.<br>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care | 9/30/2016 | 9/30/2016 | Completed | N/A | 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.) | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 5. Use EHRs and other technical platforms to track all patients engaged in the project. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

| Domain 2 Pay for Performance and Pay for Reporting - Project | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| | | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.b.iii***

| | | |
|---|---|---|
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.3333333 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 0.25 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| | Pass & Ongoing | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.b.iii***

| | | | |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | 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* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 2.b.iii*

| | | | |
|---|---|---|---|
| | | | 1 |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |
| | | | 0.5 |
| | *Enter Reviewer Comment* | | |

| Domain 2 Pay for Performance Project | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 1 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |
| | *Enter Reviewer Comment* | | |
| | | | 0 |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.b.iii***

| | | | |
|---|---|---|---|
| | Children's Access to Primary Care- 25 months to 6 years | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | *Please Select* | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **3.50** |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - 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 | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,450,096 |
| **DY4, Q2 Payment Earned** | $ | 879,725 |

**2.d.i Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 290,019 | 241,683 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **290,019** | **241,683** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 4.00 | 4.00 | 100% | 8% | 8% | 116,008 | 116,008 |
| | Domain 2 Pay for Performance (P4P) | Complete | 4.00 | 2.00 | 50% | 72% | 72% | 1,044,069 | 522,034 |
| **Domain 2 Subtotal** | | | **8.00** | **6.00** | **75%** | **80%** | **80%** | **1,160,077** | **638,042** |
| **Total** | | **Complete** | **14.00** | **11.00** | **79%** | **100%** | **100%** | **1,450,096** | **879,725** |

**Total Project 2.d.i AVs Awarded: 11 out of 14**

Hide Reviewer Comments

**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 |
| | *Enter Reviewer Comment* | | | | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.d.i***

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| **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. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *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 | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Pass & Complete | N/A |
| | *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. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *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 | N/A |
| | *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. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 9. Measure PAM® components | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| | *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. | 3/31/2018 | 3/31/2018 | Completed | Fail | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.d.i***

| | | | | | | |
|---|---|---|---|---|---|---|
| | *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 | | N/A |
| | *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 | | N/A |
| | *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 | 3/31/2018 | 3/31/2018 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations. | 3/31/2018 | 3/31/2018 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community | 3/31/2018 | 3/31/2018 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 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 | | N/A |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.d.i***

| AV Driving | Measure | Reviewer Status | AVs Awarded |
|---|---|---|---|
| ● | C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information | | 0.25 |
| | | | 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* | | |
| ● | 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 | | 1 |

**Domain 2 Pay for Performance  Project 2.d.i**

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 2.d.i***

| AV Driving | Measure | Reviewer Status | AVs Awarded |
|---|---|---|---|
| | C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Fail | 0 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **2.00** |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.i***

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

| Payment Snapshot | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,429,832 |
| **DY4, Q2 Payment Earned** | $ | 595,763 |

**3.a.i Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 285,966 | 238,305 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **285,966** | **238,305** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 2.00 | 2.00 | 100% | 10% | 10% | 142,983 | 142,983 |
| | Domain 3 Pay for Performance | | 7.00 | 1.50 | 21% | 70% | 70% | 1,000,883 | 214,475 |
| **Domain 3 Subtotal** | | | **9.00** | **3.50** | **39%** | **80%** | **80%** | **1,143,866** | **357,458** |
| **Total** | | **Complete** | **15.00** | **8.50** | **57%** | **100%** | **100%** | **1,429,832** | **595,763** |

**Total Project 3.a.i AVs Awarded: 8.5 out of 15**

Hide Reviewer Comments

**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 |
| | *Enter Reviewer Comment* | | | | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.i***

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 |
| | | | | | | 0 |

**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 |
|---|---|---|---|---|---|---|---|
| 3.a.i Model 1 | | 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. | 9/30/2017 | 9/30/2017 | Completed | Pass (with Exception) & Complete | 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 | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | | 3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs. | 9/30/2017 | 9/30/2017 | Completed | | N/A |
| | | *Enter Reviewer Comment* | | | | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | *Enter Reviewer Comment* | | | | | |
| | | | | | | Pass & Complete | N/A |
| 3.a.i Model 2 | | *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 | N/A |
| | | *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. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | | | | | | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | | 9. Implement IMPACT Model at Primary Care Sites. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | | 10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | | | | | | Pass & Complete | |


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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.i***

| | | |
|---|---|---|
| | | N/A |
| | | N/A |
| | | N/A |
| | | N/A |

| Domain 3 Pay for Reporting | | |
|---|---|---|
| Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | | 0.5 |
| | | 0.5 |
| | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.i***

| Domain 3 Pay for Performance | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | Adherence to Antipsychotic Medications for People with Schizophrenia | | 0 |
| | | | 0.5 |
| | | | 0 |
| | | | |
| | | | 0 |
| | | | 0 |
| | | | 0 |
| | | | 0.5 |
| | | | 0.5 |
| | | | 0 |
| | | | 0 |
| | P4P Measure DY3Q4 | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - 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 | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 1,358,370 |
| **DY4, Q2 Payment Earned** | $ | 565,988 |

**3.a.ii Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 271,674 | 226,395 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **271,674** | **226,395** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 2.00 | 2.00 | 100% | 10% | 10% | 135,837 | 135,837 |
| | Domain 3 Pay for Performance (P4P) | | 7.00 | 1.50 | 21% | 70% | 70% | 950,859 | 203,756 |
| **Domain 2 Subtotal** | | | **9.00** | **3.50** | **39%** | **80%** | **80%** | **1,086,696** | **339,593** |
| **Total** | | **Complete** | **15.00** | **8.50** | **57%** | **100%** | **100%** | **1,358,370** | **565,988** |

**Total Project 3.a.ii AVs Awarded: 8.5 out of 15**

Hide Reviewer Comments

**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 |
| | *Enter Reviewer Comment* | | | | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.ii***

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| | **Total** | | | | | **0.00** |

| 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. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
| | *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. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
| | *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. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 4. Develop written treatment protocols with consensus from participating providers and facilities. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *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 | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.ii***

| | | | | | | |
|---|---|---|---|---|---|---|
| | *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). | 9/30/2017 | 9/30/2017 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff. | 9/30/2017 | 9/30/2017 | Completed | | N/A |
| | *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. | 9/30/2017 | 9/30/2017 | Completed | | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers. | 9/30/2017 | 9/30/2017 | Completed | | N/A |
| | *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 | | N/A |
| | | | | | | |
| | | | | | | N/A |
| | | | | | | |

**Domain 3 Pay for Reporting**


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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.ii***

| | | | |
|---|---|---|---|
| | Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | | 0.5 |
| | | | 0.5 |
| | | | 1 |

| Domain 3 Pay for Performance | | | |
|---|---|---|---|
| | Adherence to Antipsychotic Medications for People with Schizophrenia | | 0 |
| | | | 0.5 |
| | | | 0 |

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.a.ii***

| | | | |
|---|---|---|---|
| | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia | N/A | N/A |
| | P4P Measure DY3Q4 | | |
| | | Fail | 0 |
| | P4P Measure DY3Q4 | | |
| | | Fail | 0 |
| | P4P Measure DY3Q4 | | |
| | | Fail | 0 |
| | P4P Measure DY3Q4 | | |
| | | Pass & Ongoing | 0.5 |
| | P4P Measure DY3Q4 | | |
| | | Pass & Ongoing | 0.5 |
| | P4P Measure DY3Q4 | | |
| | | Fail | 0 |
| | P4P Measure DY3Q4 | | |
| | | *Please Select* | 0 |
| | P4P Measure DY3Q4 | | |
| **Total** | | | **1.50** |

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.b.i***

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

| Payment Snapshot | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 333,608 |
| **DY4, Q2 Payment Earned** | $ | 296,540 |

**3.b.i Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 67% | 222,405 | 185,338 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **67%** | **222,405** | **185,338** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 8.00 | 8.00 | 100% | 10% | 33% | 111,203 | 111,203 |
| | Domain 3 Pay for Performance (P4P) | | 0.00 | 0.00 | N/A | 70% | 0% | - | - |
| **Domain 2 Subtotal** | | | **8.00** | **8.00** | **100%** | **80%** | **33%** | **111,203** | **111,203** |
| **Total** | | **Complete** | **14.00** | **13.00** | **93%** | **100%** | **100%** | **333,608** | **296,540** |

**Total Project 3.b.i AVs Awarded: 13 out of 14**

Hide Reviewer Comments

| Domain 1 Project Milestones Project 3.b.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 |
| | *Enter Reviewer Comment* | | | | | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 3.b.i*

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | 9/30/2016 | 9/30/2016 | Completed | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| | **Total** | | | | | **0.00** |

| Domain 1 Project Prescribed Milestones - Project 3.b.i | | | | | | |
|---|---|---|---|---|---|---|
| **AV Driving** | **Project Requirement and Metric/Deliverable** | **Required Due Date** | **Committed Due Date** | **Milestone Status** | **Reviewer Status** | **AVs Awarded** |
| | 1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Ensure that all PPS safety net providers are actively connected to 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 DY 3. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 3. 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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | *Enter Reviewer Comment* | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | 5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange). | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | *Enter Reviewer Comment* | | | | | |
| | 7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | *Enter Reviewer Comment* | | | | | |
| | 9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | *Enter Reviewer Comment* | | | | | |
| | 12. Document patient driven self-management goals in the medical record and review with patients at each visit. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |

| | | | | | | |
|---|---|---|---|---|---|---|
| | *Enter Reviewer Comment* | | | | | |
| | 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 14. Develop and implement protocols for home blood pressure monitoring with follow up support. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 16. Facilitate referrals to NYS Smoker's Quitline. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 18. Adopt strategies from the Million Hearts Campaign. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 3.b.i*

| | |
|---|---|
| | *Enter Reviewer Comment* |

| Domain 3 Pay for Performance and Pay for Reporting | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 0.5 |
| | P4R Measure in DY3Q4 | | |
| | | | 0.5 |
| | P4R Measure in DY3Q4 | | |
| | | | 1 |
| | P4R Measure in DY3Q4 | | |
| | | | 1 |
| | P4R Measure in DY3Q4 | | |
| | | | 1 |
| | P4R Measure in DY3Q4 | | |
| | | | 0.3333333 |
| | P4R Measure in DY3Q4 | | |
| | | | |

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 3.b.i***

| | | | |
|---|---|---|---|
| | P4R Measure in DY3Q4 | | |
| | | Pass & Ongoing | 0.3333333 |
| | P4R Measure in DY3Q4 | | |
| | | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q4 | | |
| | | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q4 | | |
| | | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q4 | | |
| | | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q4 | | |
| **Total** | | | **8.00** |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 3.d.iii*

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

| Payment Snapshot | | |
|---|---|---|
| DY4, Q2 Payment Available | $ | 1,150,804 |
| DY4, Q2 Payment Earned | $ | 709,662 |

**3.d.iii Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 230,161 | 191,801 |
| | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | |
| **Domain 1 Subtotal** | | | **6.00** | **5.00** | **83%** | **20%** | **20%** | **230,161** | **191,801** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 4.00 | 4.00 | 100% | 10% | 10% | 115,080 | 115,080 |
| | Domain 3 Pay for Performance (P4P) | | 2.00 | 1.00 | 50% | 70% | 70% | 805,563 | 402,781 |
| **Domain 2 Subtotal** | | | **6.00** | **5.00** | **83%** | **80%** | **80%** | **920,643** | **517,862** |
| **Total** | | **Complete** | **12.00** | **10.00** | **83%** | **100%** | **100%** | **1,150,804** | **709,662** |

**Total Project 3.d.iii AVs Awarded: 10 out of 12**

Hide Reviewer Comments

| 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 |
| | *Enter Reviewer Comment* | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Module 2 - Project Implementation Speed | 9/30/2016 | 9/30/2016 | Completed | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | | | | | Fail | 0 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| **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. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 3. Deliver educational activities addressing asthma management to participating primary care providers. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 3.d.iii*

| | | | | | | |
|---|---|---|---|---|---|---|
| | 5. Use EHRs or other technical platforms to track all patients engaged in this project. | 9/30/2016 | 9/30/2016 | Completed | N/A | N/A |
| | *Enter Reviewer Comment* | | | | | |

| Domain 3 Pay for Performance and Pay for Reporting | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 1 |
| | P4R Measure DY3Q4 | | |
| | | | 0.5 |
| | P4R Measure DY3Q4 | | |
| | | | 0.5 |
| | P4R Measure DY3Q4 | | |
| | | | 1 |
| | P4R Measure DY3Q4 | | |
| | | | 1 |
| | P4R Measure DY3Q4 | | |

| Domain 3 Pay for Performance | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | | | 1 |
| | P4P Measure DY3Q4 | | |
| | | | 0 |
| | P4P Measure DY3Q4 | | |
| | | | 0 |
| | P4P Measure DY3Q4 | | |

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - 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 | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 867,496 |
| **DY4, Q2 Payment Earned** | $ | 867,496 |

**4.b.i Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 173,499 | 173,499 |
| | 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%** | **20%** | **20%** | **173,499** | **173,499** |
| **Domain 4** | Domain 4 Pay for Reporting (P4R) | Complete | 17.00 | 17.00 | 100% | 80% | 80% | 693,997 | 693,997 |
| | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| **Domain 4 Subtotal** | | | **17.00** | **17.00** | **100%** | **80%** | **80%** | **693,997** | **693,997** |
| **Total** | | **Complete** | **22.00** | **22.00** | **100%** | **100%** | **100%** | **867,496** | **867,496** |

**Total Project 4.b.i AVs Awarded: 22 out of 22**

Hide Reviewer Comments

**Domain 4 Pay for Performance and Pay for Reporting**

| AV Driving | Measure | Reviewer Status | AVs Awarded |
|---|---|---|---|
| ● | Percentage of premature death (before age 65 years) | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 4.b.i*

| | | | |
|---|---|---|---|
| | Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |

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*Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)*
*Better Health for Northeast New York - Project 4.b.i*

| | | | |
|---|---|---|---|
| | Percentage of children and adolescents who are obese | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| **Total** | | | **17.00** |

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - 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 | | |
|---|---|---|
| **DY4, Q2 Payment Available** | $ | 679,046 |
| **DY4, Q2 Payment Earned** | $ | 679,046 |

**4.b.ii Scoresheet**

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY4) | Domain Funding % (DY4, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 20% | 20% | 135,809 | 135,809 |
| | 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%** | **20%** | **20%** | **135,809** | **135,809** |
| **Domain 4** | Domain 4 Pay for Reporting (P4R) | Complete | 17.00 | 17.00 | 100% | 80% | 80% | 543,237 | 543,237 |
| | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| **Domain 4 Subtotal** | | | **17.00** | **17.00** | **100%** | **80%** | **80%** | **543,237** | **543,237** |
| **Total** | | **Complete** | **22.00** | **22.00** | **100%** | **100%** | **100%** | **679,046** | **679,046** |

**Total Project 4.b.ii AVs Awarded: 22 out of 22**

Hide Reviewer Comments

| Domain 4 Pay for Performance and Pay for Reporting | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| ● | Percentage of premature death (before age 65 years) | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |

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**Delivery System Reform Incentive Payment (DSRIP) Program**

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - 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* | | |
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NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

Save & Return

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***Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)***
***Better Health for Northeast New York - Project 4.b.ii***

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| **Total** | | **17.00** |