







| 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 <a href="#">Click to Access AV Scorecard Overview</a> |   |

| 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.   |  |



Print Summary

Print All

Achievement Value (AV) Scorecard Mount Sinai PPS, LLC

PPS Information

|            |  |
|------------|--|
| Quarter    | DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter) |
| PPS        | Mount Sinai PPS, LLC                                       |
| PPS Number | 34   |

Achievement Value (AV) Scorecard Summary

| Project Link (click on the purple link below to access each individual project report) | AV Data       |             |               |                 | Payment Data   |                        |
|--|---------------|-------------|---------------|-----------------|--|------------------------|
|  | AVs Available | AVs Awarded | AV Adjustment | Net AVs Awarded | DY4, Q2 Payment Available  | DY4, Q2 Payment Earned |
| Domain I - Organizational (All Projects)   | 5.00          | 4.00        | 0.00          | 4.00            | <i>Organizational funds are embedded within each project's payment</i> |                        |
| 2.a.i  | 29.00         | 23.33       | 0.00          | 23.33           | \$ 2,640,978   | \$ 1,543,505           |
| 2.b.iv   | 29.00         | 24.00       | 0.00          | 24.00           | \$ 1,895,586   | \$ 1,149,989           |
| 2.b.viii   | 29.00         | 24.00       | 0.00          | 24.00           | \$ 2,054,814   | \$ 1,246,587           |
| 2.c.i  | 29.00         | 24.00       | 0.00          | 24.00           | \$ 1,732,076   | \$ 1,050,793           |
| 3.a.i  | 16.00         | 11.00       | 0.00          | 11.00           | \$ 1,691,345   | \$ 1,042,996           |
| 3.a.iii  | 16.00         | 10.00       | 0.00          | 10.00           | \$ 1,414,349   | \$ 825,037             |
| 3.b.i  | 14.00         | 12.00       | 0.00          | 12.00           | \$ 384,402   | \$ 298,979             |
| 3.c.i  | 12.00         | 11.00       | 0.00          | 11.00           | \$ 399,543   | \$ 355,150             |
| 4.b.ii   | 22.00         | 21.00       | 0.00          | 21.00           | \$ 846,506   | \$ 812,646             |
| 4.c.ii   | 16.00         | 15.00       | 0.00          | 15.00           | \$ 940,120   | \$ 902,515             |



Department of Health

Medicaid Redesign Team

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

*Achievement Value (AV) Scorecard  
Mount Sinai PPS, LLC*

Print Summary

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| AV Adjustments (Column F) |               |               |             |               |                      |                     |  |
|---------------------------|---------------|---------------|-------------|---------------|----------------------|---------------------|--|
| <b>Total</b>              | <b>212.00</b> | <b>175.33</b> | <b>0.00</b> | <b>175.33</b> | <b>\$ 13,999,719</b> | <b>\$ 9,228,197</b> |  |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - 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          | 0.00        | 0.00        | 0.00        | 0%         |
| 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        |
| <b>Total</b>                                       | <b>Complete</b> | <b>5.00</b>   | <b>4.00</b> | <b>0.00</b> | <b>4.00</b> | <b>80%</b> |

Net Organizational AVs Awarded: 4 out of 5

Hide Reviewer Comments

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



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|   |  |   |           |     |            |                 |   |
|---|--|---|-----------|-----|------------|-----------------|---|
|   |  |   |           |     |            |                 |   |
| Additional Workforce Strategy Budget Updates (non AV-driving) |  | 1. Define target workforce state (in line with DSRIP program's goals)   | N/A       | N/A | In Process | Pass & Ongoing  | 1 |
|   |  | 2. Create a workforce transition roadmap for achieving defined target workforce   | N/A       | N/A | In Process | Pass & Ongoing  |   |
|   |  | 3. Perform detailed gap analysis between current state assessment of workforce and projected future state   | N/A       | N/A | In Process | Pass & Ongoing  |   |
|   |  | 4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements | 6/30/2016 | N/A | Completed  | Pass & Complete |   |
|   |  | 5. Develop training strategy  | N/A       | N/A | In Process | Pass & Ongoing  |   |
|   |  | 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 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|   |   |                            |     |     |            |                |          |
|---|---|----------------------------|-----|-----|------------|----------------|----------|
| Additional Workforce Strategy Topic Areas | ● | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | N/A      |
|   | ● | Key Stakeholders           | N/A | N/A | In Process | Pass & Ongoing |          |
|   | ● | IT Expectations            | N/A | N/A | In Process | Pass & Ongoing |          |
|   | ● | Progress Reporting         | N/A | N/A | In Process | Pass & Ongoing |          |
| <b>Total</b>                              |   |                            |     |     |            |                | <b>1</b> |

| Section 01 - Budget                |            |  |                   |                    |                  |                 |            |
|------------------------------------|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                    | AV Driving | Milestone                                  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Quarterly Project Reports, Project | ●          | Module 1.1 - PPS Budget Report (Baseline)  | Ongoing           | N/A                | Completed        | Pass & Complete | 1          |
|                                    | ●          | Module 1.2 - PPS Budget Report (Quarterly) | Ongoing           | N/A                | In Process       | Pass & Ongoing  |            |
|                                    | ●          | Module 1.3 - PPS Flow of Funds (Baseline)  | Ongoing           | N/A                | Completed        | Pass & Complete |            |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs)

|                          |   |  |         |     |            |                |          |
|--------------------------|---|--|---------|-----|------------|----------------|----------|
| Budget and Flow of Funds | ● |  |         |     |            |                |          |
|                          | ● | Module 1.4 - PPS Flow of Funds (Quarterly) | Ongoing | N/A | In Process | Pass & Ongoing |          |
|                          | ● | Quarterly Progress Reports                 | N/A     | N/A | In Process | Pass & Ongoing |          |
| <b>Total</b>             |   |  |         |     |            |                | <b>1</b> |

| Section 02 - Governance      |            |  |                   |                    |                  |                 |            |
|------------------------------|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure              | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Governance Structure Updates | ●          | 1. Finalize governance structure and sub-committee structure   | 6/30/2015         | N/A                | Completed        | Pass & Complete | 1          |
|                              | ●          | 2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project | 12/31/2015        | N/A                | Completed        | Pass & Complete |            |
|                              | ●          | 3. Finalize bylaws and policies or Committee Guidelines where applicable                                   | 9/30/2015         | N/A                | Completed        | Pass & Complete |            |
| Governance Process Update    | ●          | 4. Establish governance structure reporting and monitoring processes                                       | 12/31/2015        | N/A                | Completed        | Pass & Complete |            |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs)

|   |   |  |           |     |            |                 |     |  |
|---|---|--|-----------|-----|------------|-----------------|-----|--|
| Additional Governance Milestones (non AV-driving) | ● | 5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, | 6/30/2016 | N/A | Completed  | Pass & Complete | N/A |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | 6. Finalize partnership agreements or contracts with CBOs  | N/A       | N/A | Completed  | Pass & Complete |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | 7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and  | N/A       | N/A | Completed  | Pass & Complete |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | 8. Finalize workforce communication and engagement plan  | 6/30/2016 | N/A | Completed  | Pass & Complete |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | 9. Inclusion of CBOs in PPS Implementation   | N/A       | N/A | Completed  | Pass & Complete |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | Major Risks to Implementation & Risk Mitigation Strategies   | N/A       | N/A | In Process | Pass & Ongoing  |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | Major Dependencies on Organizational Workstreams   | N/A       | N/A | In Process | Pass & Ongoing  |     |  |
|   |   |  |           |     |            |                 |     |  |
|   | ● | Roles and Responsibilities   | N/A       | N/A | In Process | Pass & Ongoing  |     |  |





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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs*

|                                   |   |                    |     |     |            |                |     |
|-----------------------------------|---|--------------------|-----|-----|------------|----------------|-----|
| Additional Governance Topic Areas | ● |                    |     |     |            |                | N/A |
|                                   | ● | Key Stakeholders   | N/A | N/A | In Process | Pass & Ongoing |     |
|                                   | ● | IT Expectations    | N/A | N/A | In Process | Pass & Ongoing |     |
|                                   | ● | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing |     |
| <b>Total</b>                      |   |                    |     |     |            | <b>1</b>       |     |

| Section 03 - Financial Sustainability |            |   |                   |                    |                  |                 |            |
|---------------------------------------|------------|---|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                       | AV Driving | Milestone   | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Financial Stability Update            | ●          | 1. Finalize PPS finance structure, including reporting structure  | 12/31/2015        | N/A                | Completed        | Pass & Complete |            |
|                                       | ●          | 2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues. | 3/31/2016         | N/A                | Completed        | Pass & Complete |            |
|                                       | ●          | 3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d  | 12/31/2015        | N/A                | Completed        | Pass & Complete |            |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|   |   |  |            |            |            |                 |   |
|---|---|--|------------|------------|------------|-----------------|---|
|   |   |  |            |            |            |                 |   |
|   | ● | 4. Develop a Value Based Needs Assessment "VNA"  | 3/31/2017  | N/A        | Completed  | Pass & Complete | 0 |
|   |   |  |            |            |            |                 |   |
| PPS Transition to Value Based Payment                   | ● | 5. Develop an implementation plan geared towards addressing the needs identified within your VNA               | 12/31/2016 | 12/31/2016 | Completed  | Pass & Complete |   |
|   |   |  |            |            |            |                 |   |
| Additional PPS Transition to Value Based Payment System | ● | 6. Develop partner engagement schedule for partners for VBP education and                                      | TBD        | N/A        | Completed  | Pass & Complete |   |
|   |   |  |            |            |            |                 |   |
|   | ● | 7. PPS Defined VBP Milestone #7 – Data Analytics   | TBD        | N/A        | Completed  | Pass & Complete |   |
|   |   |  |            |            |            |                 |   |
|   | ● | 8. PPS Defined VBP Milestone #8 – Care Coordination  | TBD        | N/A        | Completed  | Fail            |   |
|   |   | The PPS failed to explain how the steps of this milestones relate to the PPS' VBP support implementation plan. |            |            |            |                 |   |
|   | ● | 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 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs)

|  |   |                            |     |     |            |                |          |
|--|---|----------------------------|-----|-----|------------|----------------|----------|
| Additional Financial Stability Topic Areas | ● | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | N/A      |
|  |   |                            |     |     |            |                |          |
|  | ● | Key Stakeholders           | N/A | N/A | In Process | Pass & Ongoing |          |
|  |   |                            |     |     |            |                |          |
|  | ● | IT Expectations            | N/A | N/A | In Process | Pass & Ongoing |          |
|  |   |                            |     |     |            |                |          |
|  | ● | Progress Reporting         | N/A | N/A | In Process | Pass & Ongoing |          |
|  |   |                            |     |     |            |                |          |
| <b>Total</b>                               |   |                            |     |     |            |                | <b>0</b> |

| Section 04 - Cultural Competency & Health Literacy |            |  |                   |                    |                  |                 |            |
|--|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                                    | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Cultural Competency /Health Literacy               | ●          | 1. Finalize cultural competency / health literacy strategy.  | 12/31/2015        | N/A                | Completed        | Pass & Complete | 1          |
|  |            |  |                   |                    |                  |                 |            |
|  | ●          | 2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material). | 6/30/2016         | N/A                | Completed        | Pass & Complete |            |
|  |            |  |                   |                    |                  |                 |            |
|  | ●          | Major Risks to Implementation & Risk Mitigation Strategies   | N/A               | N/A                | In Process       | Pass & Ongoing  |            |



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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs*

|   |                    |  |     |            |                |                |     |
|---|--------------------|--|-----|------------|----------------|----------------|-----|
| Additional Cultural Competency /Health Literacy Topic Areas | ●                  |  |     |            |                |                | N/A |
|   | ●                  | Major Dependencies on Organizational Workstreams | N/A | N/A        | In Process     | Pass & Ongoing |     |
|   | ●                  |  |     |            |                |                |     |
|   | ●                  | Roles and Responsibilities                       | N/A | N/A        | In Process     | Pass & Ongoing |     |
|   | ●                  |  |     |            |                |                |     |
|   | ●                  | Key Stakeholders                                 | N/A | N/A        | In Process     | Pass & Ongoing |     |
|   | ●                  |  |     |            |                |                |     |
| ●   | IT Expectations    | N/A  | N/A | In Process | Pass & Ongoing |                |     |
| ●   |                    |  |     |            |                |                |     |
| ●   | Progress Reporting | N/A  | N/A | In Process | Pass & Ongoing |                |     |
| ●   |                    |  |     |            |                |                |     |
| <b>Total</b>  |                    |  |     |            |                | <b>1</b>       |     |

| Section 05 - IT Systems and Processes |            |  |                   |                    |                  |                 |            |
|---------------------------------------|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                       | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
|                                       | ●          | 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         | N/A                | Complete         | Pass & Complete |            |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|   |   |  |            |     |            |                 |     |
|---|---|--|------------|-----|------------|-----------------|-----|
| IT Systems and Processes                        |   |  |            |     |            |                 |     |
|   | ● | 2. Develop an IT Change Management Strategy.   | 12/31/2016 | N/A | Complete   | Pass & Complete | N/A |
|   | ● | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network | N/A        | N/A | In Process | Pass & Ongoing  |     |
|   | ● | 4. Develop a specific plan for engaging attributed members in Qualifying Entities                  | N/A        | N/A | In Process | Pass & Ongoing  |     |
|   | ● | 5. Develop a data security and confidentiality plan.   | 6/30/2016  | N/A | Complete   | Pass & Complete |     |
|   |   |  |            |     |            |                 |     |
| Additional IT Systems and Processes Topic Areas | ● | Major Risks to Implementation & Risk Mitigation Strategies   | N/A        | N/A | In Process | Pass & Ongoing  | N/A |
|   | ● | Major Dependencies on Organizational Workstreams   | N/A        | N/A | In Process | Pass & Ongoing  |     |
|   | ● | Roles and Responsibilities   | N/A        | N/A | In Process | Pass & Ongoing  |     |
|   | ● | Key Stakeholders   | N/A        | N/A | In Process | Pass & Ongoing  |     |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs)

|              |  |                    |     |     |            |                |          |
|--------------|--|--------------------|-----|-----|------------|----------------|----------|
|              |  |                    |     |     |            |                |          |
|              |  | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing |          |
| <b>Total</b> |  |                    |     |     |            |                | <b>0</b> |

| Section 06 - Performance Reporting |            |  |                   |                    |                  |                 |            |
|------------------------------------|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                    | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Performance Reporting              |            | 1. Establish reporting structure for PPS-wide performance reporting and communication.   | N/A               | N/A                | In Process       | Pass & Ongoing  | N/A        |
|                                    |            | 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting. | N/A               | N/A                | In Process       | Pass & Ongoing  | N/A        |
|                                    |            | Major Risks to Implementation & Risk Mitigation Strategies   | N/A               | N/A                | In Process       | Pass & Ongoing  |            |
|                                    |            | Major Dependencies on Organizational Workstreams   | N/A               | N/A                | In Process       | Pass & Ongoing  |            |
|                                    |            | Roles and Responsibilities   | N/A               | N/A                | In Process       | Pass & Ongoing  |            |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs)

|  |   |                    |     |     |            |                |          |
|--|---|--------------------|-----|-----|------------|----------------|----------|
| Additional Performance Reporting Topic Areas | ● |                    |     |     |            |                | N/A      |
|  | ● | Key Stakeholders   | N/A | N/A | In Process | Pass & Ongoing |          |
|  | ● |                    |     |     |            |                |          |
|  | ● | IT Expectations    | N/A | N/A | In Process | Pass & Ongoing |          |
|  | ● |                    |     |     |            |                |          |
|  | ● | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing |          |
| <b>Total</b>                                 |   |                    |     |     |            |                | <b>0</b> |

| Section 07 - Practitioner Engagement |            |  |                   |                    |                  |                 |            |
|--------------------------------------|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                      | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Practitioner Engagement              | ●          | 1. Develop Practitioners communication and engagement plan.  | N/A               | N/A                | In Process       | Pass & Ongoing  | N/A        |
|                                      | ●          | 2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. | N/A               | N/A                | In Process       | Pass & Ongoing  |            |
|                                      | ●          |  |                   |                    |                  |                 |            |
|                                      | ●          | Major Risks to Implementation & Risk Mitigation Strategies   | N/A               | N/A                | In Process       | Pass & Ongoing  |            |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|  |                    |  |     |            |                |                |     |
|--|--------------------|--|-----|------------|----------------|----------------|-----|
| Additional Practitioner Engagement Topic Areas | ●                  |  |     |            |                |                | N/A |
|  | ●                  | Major Dependencies on Organizational Workstreams | N/A | N/A        | In Process     | Pass & Ongoing |     |
|  | ●                  |  |     |            |                |                |     |
|  | ●                  | Roles and Responsibilities                       | N/A | N/A        | In Process     | Pass & Ongoing |     |
|  | ●                  |  |     |            |                |                |     |
|  | ●                  | Key Stakeholders                                 | N/A | N/A        | In Process     | Pass & Ongoing |     |
|  | ●                  |  |     |            |                |                |     |
| ●  | IT Expectations    | N/A  | N/A | In Process | Pass & Ongoing |                |     |
| ●  |                    |  |     |            |                |                |     |
| ●  | Progress Reporting | N/A  | N/A | In Process | Pass & Ongoing |                |     |
| ●  |                    |  |     |            |                |                |     |
| <b>Total</b>                                   |                    |  |     |            |                | <b>0</b>       |     |

| Section 08 - Population Health Management |            |  |                   |                    |                  |                 |            |
|---|------------|--|-------------------|--------------------|------------------|-----------------|------------|
| Process Measure                           | AV Driving | Milestone  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Population Health                         | ●          | 1. Develop population health management roadmap. | N/A               | N/A                | In Process       | Pass & Ongoing  | N/A        |
|   | ●          |  |                   |                    |                  |                 |            |
|   | ●          | 2. Finalize PPS-wide bed reduction plan.         | N/A               | N/A                | In Process       | Pass & Ongoing  | N/A        |
|   | ●          |  |                   |                    |                  |                 |            |





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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs**

|  |              |  |     |     |            |                |     |          |  |
|--|--------------|--|-----|-----|------------|----------------|-----|----------|--|
|  |              |  |     |     |            |                | N/A |          |  |
| Additional Population Health Topic Areas | ●            | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | N/A |          |  |
|  | ●            | Major Dependencies on Organizational Workstreams           | N/A | N/A | In Process | Pass & Ongoing |     |          |  |
|  | ●            | Roles and Responsibilities                                 | N/A | N/A | In Process | Pass & Ongoing |     |          |  |
|  | ●            | Key Stakeholders   | N/A | N/A | In Process | Pass & Ongoing |     |          |  |
|  | ●            | IT Expectations  | N/A | N/A | In Process | Pass & Ongoing |     |          |  |
|  | ●            | Progress Reporting   | N/A | N/A | In Process | Pass & Ongoing |     |          |  |
|  | <b>Total</b> |  |     |     |            |                |     | <b>0</b> |  |

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



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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs*

|   |              |  |     |     |            |                |     |          |  |
|---|--------------|--|-----|-----|------------|----------------|-----|----------|--|
| Clinical Integration                        | ●            |  |     |     |            |                | N/A |          |  |
|   | ●            | 2. Develop a Clinical Integration strategy.                | N/A | N/A | In Process | Pass & Ongoing | N/A |          |  |
| Additional Clinical Integration 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 |     |          |  |
|   | <b>Total</b> |  |     |     |            |                |     | <b>0</b> |  |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC 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            | 10.00                   | 50.00               | 40.00             | 80%           | 0.00         | 40.00           | 80%           |
| Project Adjustments (applied to one project only)    | Various         | 10.00                   | 162.00              | 135.33            | 84%           | 0.00         | 135.33          | 84%           |
| <b>Total</b>   |                 |                         | <b>212.00</b>       | <b>175.33</b>     | <b>83%</b>    | <b>0.00</b>  | <b>175.33</b>   | <b>83%</b>    |

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Organizational

Project Adjustments

**No AV Adjustments**

Please note that there are no AV adjustments for Mount Sinai PPS, LLC in DY2, Q1



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
Mount Sinai PPS, LLC - Project 2.a.i



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

| Payment Snapshot                 |              |
|----------------------------------|--------------|
| <b>DY4, Q2 Payment Available</b> | \$ 2,640,978 |
| <b>DY4, Q2 Payment Earned</b>    | \$ 1,543,505 |

| 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          | 4.00            | 80%           | 20%                    | 20%                        | 528,196                | 381,475                 |
|                          | Project Implementation Speed       | Complete        | 1.00          | 0.33            | 33%           |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>4.33</b>     | <b>72%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>528,196</b>         | <b>381,475</b>          |
| Domain 2                 | Domain 2 Pay for Reporting (P4R)   | Complete        | 15.00         | 15.00           | 100%          | 8%                     | 8%                         | 211,278                | 211,278                 |
|                          | Domain 2 Pay for Performance (P4P) | Complete        | 8.00          | 4.00            | 50%           | 72%                    | 72%                        | 1,901,504              | 950,752                 |
| <b>Domain 2 Subtotal</b> |                                    |                 | <b>23.00</b>  | <b>19.00</b>    | <b>83%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>2,112,783</b>       | <b>1,162,030</b>        |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>29.00</b>  | <b>23.33</b>    | <b>80%</b>    | <b>100%</b>            | <b>100%</b>                | <b>2,640,978</b>       | <b>1,543,505</b>        |

Total Project 2.a.i AVs Awarded: 23.33 out of 29

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| Domain 1 Project Milestones - Project 2.a.i   |  |                   |                    |                  |                 |             |
|---|--|-------------------|--------------------|------------------|-----------------|-------------|
| AV Driving  | Project Requirement and Metric/Deliverable                         | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|  | Module 1 - Major risks to implementation and mitigation strategies | Ongoing           | N/A                |                  | Pass & Ongoing  | N/A         |
|   | <i>Enter Reviewer Comment</i>                                      |                   |                    |                  |                 |             |
|  | Module 2 - Project Implementation Speed                            | Ongoing           | N/A                | In Process       | Pass & Ongoing  | 0.33        |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.a.i**

|                               |             |
|-------------------------------|-------------|
| <i>Enter Reviewer Comment</i> |             |
| <b>Total</b>                  | <b>0.33</b> |

**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. | 9/30/2018         | 9/30/2018          | Completed        | Fail            | 0.00        |
| <i>Enter Reviewer Comment</i> |  |                   |                    |                  |                 |             |
| ●                             | 2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.  | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |  |                   |                    |                  |                 |             |
| ●                             | 3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.   | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |  |                   |                    |                  |                 |             |
| ●                             | 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.                           | 3/31/2018         | 3/31/2018          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |  |                   |                    |                  |                 |             |
| ●                             | 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.   | 3/31/2018         | 3/31/2018          | Completed        | Fail            | N/A         |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.a.i**

|                               |   |           |           |            |                 |             |
|-------------------------------|---|-----------|-----------|------------|-----------------|-------------|
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 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.  | 9/30/2018 | 9/30/2018 | Completed  | Fail            | 0.00        |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 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. | 3/31/2018 | 3/31/2018 | Completed  | Fail            | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  |           |           | In Process | Pass & Ongoing  | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.   | 3/31/2017 | 3/31/2017 | Completed  | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.   | 9/30/2018 | 9/30/2018 | Completed  | Pass & Complete | 0.33        |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | 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  | 9/30/2017 | 9/30/2017 | Completed  | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| <b>Total</b>                  |   |           |           |            |                 | <b>0.33</b> |

**Domain 2 Pay for Reporting - Project 2.a.i**

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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - 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   |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333   |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333   |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1           |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing  | 0.25        |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Children's Access to Primary Care- 25 months to 6 years  | Pass & Ongoing  | 0.25        |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Children's Access to Primary Care- 7 to 11 years   | Pass & Ongoing  | 0.25        |
|            | <i>Enter Reviewer Comment</i>  |                 |             |
| ●          | Children's Access to Primary Care- 12 to 19 years  | Pass & Ongoing  | 0.25        |
|            | <i>Enter Reviewer Comment</i>  |                 |             |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter) Mount Sinai PPS, LLC - Project 2.a.i

|                               |   |                |   |
|-------------------------------|---|----------------|---|
| ●                             | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | H-CAHPS – Care Transition Metrics   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Medicaid Spending on ER and Inpatient Services ±  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Medicaid spending on Primary Care and community based behavioral health care  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | PDI 90– Composite of all measures +/-   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement                                  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Potentially Avoidable Emergency Room Visits   | Pass & Ongoing | 1 |





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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.a.i**

|              |  |                |              |
|--------------|--|----------------|--------------|
|              | <i>Enter Reviewer Comment</i>              |                |              |
| ●            | Potentially Avoidable Readmissions         | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>              |                |              |
| ●            | PQI 90 – Composite of all measures +/-     | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>              |                |              |
| ●            | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5          |
|              | <i>Enter Reviewer Comment</i>              |                |              |
| ●            | Primary Care - Usual Source of Care - Q2   | Pass & Ongoing | 0.5          |
|              | <i>Enter Reviewer Comment</i>              |                |              |
| <b>Total</b> |  |                | <b>15.00</b> |

| Domain 2 Pay for Performance - Project 2.a.i |  |                 |             |
|--|--|-----------------|-------------|
| AV Driving                                   | Measure  | Reviewer Status | AVS Awarded |
| ●  | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.333333    |
|  | <i>Enter Reviewer Comment</i>  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.333333    |
|  | <i>Enter Reviewer Comment</i>  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.333333    |
|  | <i>Enter Reviewer Comment</i>  |                 |             |
| ●  | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1           |
|  | <i>Enter Reviewer Comment</i>  |                 |             |
| ●  | Children's Access to Primary Care- 12 to 24 months   | Please Select   | 0           |
|  | <i>Enter Reviewer Comment</i>  |                 |             |
| ●  | Children's Access to Primary Care- 25 months to 6 years  | Please Select   | 0           |

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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.a.i**

|              |   |                |             |
|--------------|---|----------------|-------------|
| ●            | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Children's Access to Primary Care- 7 to 11 years                      | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Children's Access to Primary Care- 12 to 19 years                     | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 1           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | H-CAHPS – Care Transition Metrics                                     | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Potentially Avoidable Emergency Room Visits                           | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Potentially Avoidable Readmissions                                    | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Primary Care - Length of Relationship - Q3                            | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| ●            | Primary Care - Usual Source of Care - Q2                              | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>   |                |             |
| <b>Total</b> |   |                | <b>4.00</b> |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.b.iv

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

| Payment Snapshot          |              |
|---------------------------|--------------|
| DY4, Q2 Payment Available | \$ 1,895,586 |
| DY4, Q2 Payment Earned    | \$ 1,149,989 |

| 2.b.iv 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          | 4.00            | 80%           | 20%                    | 20%                        | 379,117                | 315,931                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 1.00            | 100%          |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>5.00</b>     | <b>83%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>379,117</b>         | <b>315,931</b>          |
| Domain 2                 | Domain 2 Pay for Reporting (P4R)   | Complete        | 15.00         | 15.00           | 100%          | 8%                     | 8%                         | 151,647                | 151,647                 |
|                          | Domain 2 Pay for Performance (P4P) | Complete        | 8.00          | 4.00            | 50%           | 72%                    | 72%                        | 1,364,822              | 682,411                 |
| <b>Domain 2 Subtotal</b> |                                    |                 | <b>23.00</b>  | <b>19.00</b>    | <b>83%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>1,516,469</b>       | <b>834,058</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>29.00</b>  | <b>24.00</b>    | <b>83%</b>    | <b>100%</b>            | <b>100%</b>                | <b>1,895,586</b>       | <b>1,149,989</b>        |

Total Project 2.b.iv AVs Awarded: 24 out of 29

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



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.iv**

|                               |   |           |           |            |                 |             |
|-------------------------------|---|-----------|-----------|------------|-----------------|-------------|
| ●                             | Module 2 - Project Implementation Speed | 3/31/2017 | 3/31/2017 | Completed  | Pass & Complete | 0.00        |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| ●                             | Module 3 - Patient Engagement Speed     | Ongoing   | N/A       | In Process | Pass & Ongoing  | 1           |
| <i>Enter Reviewer Comment</i> |   |           |           |            |                 |             |
| <b>Total</b>                  |   |           |           |            |                 | <b>1.00</b> |

| Domain 1 Project Prescribed Milestones - Project 2.b.iv |   |                   |                    |                  |                 |             |
|---|---|-------------------|--------------------|------------------|-----------------|-------------|
| AV Driving  | Project Requirement and Metric/Deliverable  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
| ●   | 1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.                              | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i>                           |   |                   |                    |                  |                 |             |
| ●   | 2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.                                   | 9/30/2017         | 9/30/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i>                           |   |                   |                    |                  |                 |             |
| ●   | 3. Ensure required social services participate in the project.  | 9/30/2017         | 9/30/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i>                           |   |                   |                    |                  |                 |             |
| ●   | 4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services. | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i>                           |   |                   |                    |                  |                 |             |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.iv**

|                               |   |           |           |           |                 |             |
|-------------------------------|---|-----------|-----------|-----------|-----------------|-------------|
| ●                             | 5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |           |                 |             |
| ●                             | 6. Ensure that a 30-day transition of care period is established.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |           |                 |             |
| ●                             | 7. Use EHRs and other technical platforms to track all patients engaged in the project.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
| <i>Enter Reviewer Comment</i> |   |           |           |           |                 |             |
| <b>Total</b>                  |   |           |           |           |                 | <b>0.00</b> |

| Domain 2 Pay for Reporting - Project 2.b.iv |  |                 |             |
|---|--|-----------------|-------------|
| AV Driving                                  | Measure  | Reviewer Status | AVs Awarded |
| ●   | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>               |  |                 |             |
| ●   | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>               |  |                 |             |
| ●   | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>               |  |                 |             |
| ●   | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1           |
| <i>Enter Reviewer Comment</i>               |  |                 |             |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.b.iv

|   |  |                |      |
|---|--|----------------|------|
| ● | Children's Access to Primary Care- 12 to 24 months                           | Pass & Ongoing | 0.25 |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Children's Access to Primary Care- 25 months to 6 years                      | Pass & Ongoing | 0.25 |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Children's Access to Primary Care- 7 to 11 years                             | Pass & Ongoing | 0.25 |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Children's Access to Primary Care- 12 to 19 years                            | Pass & Ongoing | 0.25 |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)        | Pass & Ongoing | 1    |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | H-CAHPS – Care Transition Metrics  | Pass & Ongoing | 1    |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Medicaid Spending on ER and Inpatient Services ±                             | Pass & Ongoing | 1    |
|   | <i>Enter Reviewer Comment</i>  |                |      |
| ● | Medicaid spending on Primary Care and community based behavioral health care | Pass & Ongoing | 1    |
|   | <i>Enter Reviewer Comment</i>  |                |      |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.iv**

|                               |   |                |     |
|-------------------------------|---|----------------|-----|
| ●                             | PDI 90- Composite of all measures +/-   | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards   | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement                                  | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Potentially Avoidable Emergency Room Visits   | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Potentially Avoidable Readmissions  | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | PQI 90 – Composite of all measures +/-  | Pass & Ongoing | 1   |
| <i>Enter Reviewer Comment</i> |   |                |     |
| ●                             | Primary Care - Length of Relationship - Q3  | Pass & Ongoing | 0.5 |
| <i>Enter Reviewer Comment</i> |   |                |     |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.b.iv

|                               |  |                |              |
|-------------------------------|--|----------------|--------------|
| ●                             | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5          |
| <i>Enter Reviewer Comment</i> |  |                |              |
| <b>Total</b>                  |  |                | <b>15.00</b> |

| Domain 2 Pay for Performance - Project 2.b.iv |  |                 |             |
|---|--|-----------------|-------------|
| AV Driving                                    | Measure  | Reviewer Status | AVS Awarded |
| ●   | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Children's Access to Primary Care- 12 to 24 months   | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Children's Access to Primary Care- 25 months to 6 years  | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Children's Access to Primary Care- 7 to 11 years   | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Children's Access to Primary Care- 12 to 19 years  | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing  | 1           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | H-CAHPS – Care Transition Metrics  | Fail            | 0           |
| <i>Enter Reviewer Comment</i>                 |  |                 |             |
| ●   | Potentially Avoidable Emergency Room Visits  | Please Select   | 0           |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.iv**

|              |  |                |             |
|--------------|--|----------------|-------------|
| ●            | <i>Enter Reviewer Comment</i>              |                |             |
| ●            | Potentially Avoidable Readmissions         | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>              |                |             |
| ●            | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>              |                |             |
| ●            | Primary Care - Usual Source of Care - Q2   | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>              |                |             |
| <b>Total</b> |  |                | <b>4.00</b> |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.viii**

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

| Payment Snapshot          |              |
|---------------------------|--------------|
| DY4, Q2 Payment Available | \$ 2,054,814 |
| DY4, Q2 Payment Earned    | \$ 1,246,587 |

| 2.b.viii 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          | 4.00            | 80%           | 20%                    | 20%                        | 410,963                | 342,469                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 1.00            | 100%          |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>5.00</b>     | <b>83%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>410,963</b>         | <b>342,469</b>          |
| Domain 2                 | Domain 2 Pay for Reporting (P4R)   | Complete        | 15.00         | 15.00           | 100%          | 8%                     | 8%                         | 164,385                | 164,385                 |
|                          | Domain 2 Pay for Performance (P4P) | Complete        | 8.00          | 4.00            | 50%           | 72%                    | 72%                        | 1,479,466              | 739,733                 |
| <b>Domain 2 Subtotal</b> |                                    |                 | <b>23.00</b>  | <b>19.00</b>    | <b>83%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>1,643,851</b>       | <b>904,118</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>29.00</b>  | <b>24.00</b>    | <b>83%</b>    | <b>100%</b>            | <b>100%</b>                | <b>2,054,814</b>       | <b>1,246,587</b>        |

Total Project 2.b.viii AVs Awarded: 24 out of 29

Hide Reviewer Comments

| Domain 1 Project Milestones - Project 2.b.viii |  |                   |                    |                  |                 |             |
|--|--|-------------------|--------------------|------------------|-----------------|-------------|
| 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 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.viii**

|              |   |         |     |            |                |             |
|--------------|---|---------|-----|------------|----------------|-------------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00        |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                |             |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing | 1           |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                |             |
| <b>Total</b> |   |         |     |            |                | <b>1.00</b> |

**Domain 1 Project Prescribed Milestones - Project 2.b.viii**

| AV Driving | Project Requirement and Metric/Deliverable   | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|--|-------------------|--------------------|------------------|-----------------|-------------|
| ●          | 1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.                   | 9/30/2017         | 9/30/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                   |                    |                  |                 |             |
| ●          | 2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.               | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                   |                    |                  |                 |             |
| ●          | 3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer. | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                   |                    |                  |                 |             |
| ●          | 4. Educate all staff on care pathways and INTERACT-like principles.  | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                   |                    |                  |                 |             |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.b.viii**

|   |   |           |           |           |                 |     |
|---|---|-----------|-----------|-----------|-----------------|-----|
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 6. Create coaching program to facilitate and support implementation.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 7. Educate patient and family/caretakers, to facilitate participation in planning of care.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.  | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.   | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>   |           |           |           |                 |     |
| ● | 11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.                            | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | N/A |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.viii**

|  |           |           |           |                 |             |  |
|--|-----------|-----------|-----------|-----------------|-------------|--|
| <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |  |
| 12. Use EHRs and other technical platforms to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |  |
| <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |  |
| <b>Total</b>   |           |           |           |                 | <b>0.00</b> |  |

**Domain 2 Pay for Reporting - Project 2.b.viii**

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



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.viii**

|  |   |                |      |
|--|---|----------------|------|
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Children's Access to Primary Care- 7 to 11 years  | Pass & Ongoing | 0.25 |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Children's Access to Primary Care- 12 to 19 years   | Pass & Ongoing | 0.25 |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)   | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | H-CAHPS – Care Transition Metrics   | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Medicaid Spending on ER and Inpatient Services ±  | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Medicaid spending on Primary Care and community based behavioral health care  | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | PDI 90– Composite of all measures +/-   | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |
|  | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1    |
|  | <i>Enter Reviewer Comment</i>   |                |      |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.b.viii**

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

| Domain 2 Pay for Performance - Project 2.b.viii |         |                 |             |
|---|---------|-----------------|-------------|
| AV Driving                                      | Measure | Reviewer Status | AVS Awarded |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter) Mount Sinai PPS, LLC - Project 2.b.viii

|              |  |                |             |
|--------------|--|----------------|-------------|
| ●            | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing | 0.3333333   |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing | 0.3333333   |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing | 0.3333333   |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Children's Access to Primary Care- 12 to 24 months   | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Children's Access to Primary Care- 25 months to 6 years  | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Children's Access to Primary Care- 7 to 11 years   | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Children's Access to Primary Care- 12 to 19 years  | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing | 1           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | H-CAHPS – Care Transition Metrics  | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Potentially Avoidable Emergency Room Visits  | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Potentially Avoidable Readmissions   | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Primary Care - Length of Relationship - Q3   | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| ●            | Primary Care - Usual Source of Care - Q2   | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>  |                |             |
| <b>Total</b> |  |                | <b>4.00</b> |





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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.c.i

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

| Payment Snapshot          |              |
|---------------------------|--------------|
| DY4, Q2 Payment Available | \$ 1,732,076 |
| DY4, Q2 Payment Earned    | \$ 1,050,793 |

| 2.c.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          | 4.00            | 80%           | 20%                    | 20%                        | 346,415                | 288,679                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 1.00            | 100%          |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>5.00</b>     | <b>83%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>346,415</b>         | <b>288,679</b>          |
| Domain 2                 | Domain 2 Pay for Reporting (P4R)   | Complete        | 15.00         | 15.00           | 100%          | 8%                     | 8%                         | 138,566                | 138,566                 |
|                          | Domain 2 Pay for Performance (P4P) | Complete        | 8.00          | 4.00            | 50%           | 72%                    | 72%                        | 1,247,095              | 623,548                 |
| <b>Domain 2 Subtotal</b> |                                    |                 | <b>23.00</b>  | <b>19.00</b>    | <b>83%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>1,385,661</b>       | <b>762,114</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>29.00</b>  | <b>24.00</b>    | <b>83%</b>    | <b>100%</b>            | <b>100%</b>                | <b>1,732,076</b>       | <b>1,050,793</b>        |

Total Project 2.c.i AVs Awarded: 24 out of 29

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



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.c.i**

|              |   |         |     |            |                 |             |
|--------------|---|---------|-----|------------|-----------------|-------------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | Completed  | Pass & Complete | 0.00        |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                 |             |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing  | 1           |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                 |             |
| <b>Total</b> |   |         |     |            |                 | <b>1.00</b> |

**Domain 1 Project Prescribed Milestones - Project 2.c.i**

| AV Driving | Project Requirement and Metric/Deliverable  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|---|-------------------|--------------------|------------------|-----------------|-------------|
| ●          | 1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.   | 9/30/2017         | 9/30/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>   |                   |                    |                  |                 |             |
| ●          | 2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers. | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>   |                   |                    |                  |                 |             |
| ●          | 3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.   | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>   |                   |                    |                  |                 |             |
| ●          | 4. Resource appropriately for the community navigators, evaluating placement and service type.  | 9/30/2017         | 9/30/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>   |                   |                    |                  |                 |             |
| ●          | 5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.   | 6/30/2017         | 6/30/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>   |                   |                    |                  |                 |             |

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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.c.i**

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|              |  |           |           |           |                 |             |
|--------------|--|-----------|-----------|-----------|-----------------|-------------|
|              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |
| ●            | 6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
|              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |
| ●            | 7. Market the availability of community-based navigation services.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
|              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |
| ●            | 8. Use EHRs and other technical platforms to track all patients engaged in the project.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A         |
|              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |             |
| <b>Total</b> |  |           |           |           |                 | <b>0.00</b> |

| Domain 2 Pay for Reporting - Project 2.c.i |  |                 |             |
|--|--|-----------------|-------------|
| AV Driving                                 | Measure  | Reviewer Status | AVs Awarded |
| ●  | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing  | 0.3333333   |
|  | <i>Enter Reviewer Comment</i>                                  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing  | 0.3333333   |
|  | <i>Enter Reviewer Comment</i>                                  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333   |
|  | <i>Enter Reviewer Comment</i>                                  |                 |             |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.c.i

|                               |  |                |      |
|-------------------------------|--|----------------|------|
| ●                             | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1    |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing | 0.25 |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Children's Access to Primary Care- 25 months to 6 years  | Pass & Ongoing | 0.25 |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Children's Access to Primary Care- 7 to 11 years   | Pass & Ongoing | 0.25 |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Children's Access to Primary Care- 12 to 19 years  | Pass & Ongoing | 0.25 |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing | 1    |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | H-CAHPS – Care Transition Metrics  | Pass & Ongoing | 1    |
| <i>Enter Reviewer Comment</i> |  |                |      |
| ●                             | Medicaid Spending on ER and Inpatient Services ±   | Pass & Ongoing | 1    |
| <i>Enter Reviewer Comment</i> |  |                |      |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 2.c.i

|                               |   |                |   |
|-------------------------------|---|----------------|---|
| ●                             | Medicaid spending on Primary Care and community based behavioral health care  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | PDI 90- Composite of all measures +/-   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement                                  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Potentially Avoidable Emergency Room Visits   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | Potentially Avoidable Readmissions  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |
| ●                             | PQI 90 - Composite of all measures +/-  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |   |                |   |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.c.i**

|                               |  |                |              |
|-------------------------------|--|----------------|--------------|
| ●                             | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5          |
| <i>Enter Reviewer Comment</i> |  |                |              |
| ●                             | Primary Care - Usual Source of Care - Q2   | Pass & Ongoing | 0.5          |
| <i>Enter Reviewer Comment</i> |  |                |              |
| <b>Total</b>                  |  |                | <b>15.00</b> |

| Domain 2 Pay for Performance - Project 2.c.i |  |                 |             |
|--|--|-----------------|-------------|
| AV Driving                                   | Measure  | Reviewer Status | AVs Awarded |
| ●  | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333   |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1           |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Children's Access to Primary Care- 12 to 24 months   | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Children's Access to Primary Care- 25 months to 6 years  | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Children's Access to Primary Care- 7 to 11 years   | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Children's Access to Primary Care- 12 to 19 years  | Please Select   | 0           |
| <i>Enter Reviewer Comment</i>                |  |                 |             |
| ●  | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing  | 1           |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 2.c.i**

|              |   |                |             |
|--------------|---|----------------|-------------|
| ●            | <i>Enter Reviewer Comment</i>               |                |             |
| ●            | H-CAHPS – Care Transition Metrics           | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>               |                |             |
| ●            | Potentially Avoidable Emergency Room Visits | Please Select  | 0           |
|              | <i>Enter Reviewer Comment</i>               |                |             |
| ●            | Potentially Avoidable Readmissions          | Fail           | 0           |
|              | <i>Enter Reviewer Comment</i>               |                |             |
| ●            | Primary Care - Length of Relationship - Q3  | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>               |                |             |
| ●            | Primary Care - Usual Source of Care - Q2    | Pass & Ongoing | 0.5         |
|              | <i>Enter Reviewer Comment</i>               |                |             |
| <b>Total</b> |   |                | <b>4.00</b> |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.a.i

| Project Snapshot |  |
|------------------|--|
| Project Domain   | Clinical Improvement Projects (Domain 3)                   |
| Project ID       | 3.a.i  |
| Project Title    | Integration of primary care and behavioral health services |

| Payment Snapshot          |              |
|---------------------------|--------------|
| DY4, Q2 Payment Available | \$ 1,691,345 |
| DY4, Q2 Payment Earned    | \$ 1,042,996 |

| 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          | 4.00            | 80%           | 20%                    | 20%                        | 338,269                | 281,891                 |
|                          | Project Implementation Speed     | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed         | Complete        | 1.00          | 1.00            | 100%          |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                  |                 | <b>6.00</b>   | <b>5.00</b>     | <b>83%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>338,269</b>         | <b>281,891</b>          |
| Domain 3                 | Domain 3 Pay for Reporting (P4R) | Complete        | 2.00          | 2.00            | 100%          | 10%                    | 10%                        | 169,135                | 169,135                 |
|                          | Domain 3 Pay for Performance     |                 | 8.00          | 4.00            | 50%           | 70%                    | 70%                        | 1,183,942              | 591,971                 |
| <b>Domain 3 Subtotal</b> |                                  |                 | <b>10.00</b>  | <b>6.00</b>     | <b>60%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>1,353,076</b>       | <b>761,105</b>          |
| <b>Total</b>             |                                  | <b>Complete</b> | <b>16.00</b>  | <b>11.00</b>    | <b>69%</b>    | <b>100%</b>            | <b>100%</b>                | <b>1,691,345</b>       | <b>1,042,996</b>        |

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

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





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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.i**

|              |   |         |     |            |                |          |
|--------------|---|---------|-----|------------|----------------|----------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00     |
|              | Enter Reviewer Comment                  |         |     |            |                |          |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing | 1        |
|              | Enter Reviewer Comment                  |         |     |            |                |          |
| <b>Total</b> |   |         |     |            |                | <b>1</b> |

**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. | 3/31/2018         | 3/31/2018          | Completed        | Pass & 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.               | 3/31/2018         | 3/31/2018          | Completed        | Pass & Complete | N/A         |
|               | Enter Reviewer Comment |  |                   |                    |                  |                 |             |
|               | ●                      | 4. Use EHRs or other technical platforms to track all patients engaged in this project.  | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.i**

|               |  |  |           |           |           |                 |     |
|---------------|--|--|-----------|-----------|-----------|-----------------|-----|
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| 3.a.i Model 2 |  | 5. Co-locate primary care services at behavioral health sites.   | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 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 |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 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. | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 8. Use EHRs or other technical platforms to track all patients engaged in this project.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 9. Implement IMPACT Model at Primary Care Sites.   | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 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 |
|               |  | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               |  | 11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.i**

|               |              |  |           |           |           |                 |     |
|---------------|--------------|--|-----------|-----------|-----------|-----------------|-----|
| 3.a.i Model 3 | ●            | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               | ●            | 12. Designate a Psychiatrist meeting requirements of the IMPACT Model.                   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|               |              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               | ●            | 13. Measure outcomes as required in the IMPACT Model.                                    | 3/31/2018 | 3/31/2018 | Completed | Fail            | N/A |
|               |              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               | ●            | 14. Provide "stepped care" as required by the IMPACT Model.                              | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|               |              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               | ●            | 15. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|               |              | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
|               | <b>Total</b> |  |           |           |           |                 |     |

| Domain 3 Pay for Reporting |  |                 |             |
|----------------------------|--|-----------------|-------------|
| AV Driving                 | Measure  | Reviewer Status | AVs Awarded |
| ●                          | Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | Pass & Ongoing  | 0.5         |
|                            | P4R Measure DY4, Q2  |                 |             |
| ●                          | Follow-up care for Children Prescribed ADHD Medications - Initiation Phase   | Pass & Ongoing  | 0.5         |
|                            | P4R Measure DY4, Q2  |                 |             |
| ●                          | Screening for Clinical Depression and follow-up                              | Pass & Ongoing  | 1           |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.i**

|              |                     |             |
|--------------|---------------------|-------------|
|              | P4R Measure DY4, Q2 |             |
| <b>Total</b> |                     | <b>2.00</b> |

| Domain 3 Pay for Performance |  |                 |             |
|------------------------------|--|-----------------|-------------|
| AV Driving                   | Measure  | Reviewer Status | AVS Awarded |
| ●                            | Adherence to Antipsychotic Medications for People with Schizophrenia                                       | Fail            | 0           |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Antidepressant Medication Management - Effective Acute Phase Treatment                                     | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Antidepressant Medication Management - Effective Continuation Phase Treatment                              | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia                         | Pass & Ongoing  | 1           |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Diabetes Monitoring for People with Diabetes and Schizophrenia   | Fail            | 0           |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Fail            | 0           |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Follow-up after hospitalization for Mental Illness - within 30 days  | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Follow-up after hospitalization for Mental Illness - within 7 days   | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)         | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)                         | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±                      | Please Select   | 0           |
|                              | P4P Measure DY4, Q2  |                 |             |
| <b>Total</b>                 |  |                 | <b>4.00</b> |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.a.iii

| Project Snapshot |  |
|------------------|--|
| Project Domain   | Clinical Improvement Projects (Domain 3)   |
| Project ID       | 3.a.iii  |
| Project Title    | Implementation of Evidence-Based Medication Adherence Program (MAP) in Community Based Sites for Behavioral Health Medication Compliance |

| Payment Snapshot          |              |
|---------------------------|--------------|
| DY4, Q2 Payment Available | \$ 1,414,349 |
| DY4, Q2 Payment Earned    | \$ 825,037   |

| 3.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          | 4.00            | 80%           | 20%                    | 20%                        | 282,870                | 188,580                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 0.00            | 0%            |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>4.00</b>     | <b>67%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>282,870</b>         | <b>188,580</b>          |
| Domain 3                 | Domain 3 Pay for Reporting (P4R)   | Complete        | 2.00          | 2.00            | 100%          | 10%                    | 10%                        | 141,435                | 141,435                 |
|                          | Domain 3 Pay for Performance (P4P) |                 | 8.00          | 4.00            | 50%           | 70%                    | 70%                        | 990,044                | 495,022                 |
| <b>Domain 3 Subtotal</b> |                                    |                 | <b>10.00</b>  | <b>6.00</b>     | <b>60%</b>    | <b>80%</b>             | <b>80%</b>                 | <b>1,131,479</b>       | <b>636,457</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>16.00</b>  | <b>10.00</b>    | <b>63%</b>    | <b>100%</b>            | <b>100%</b>                | <b>1,414,349</b>       | <b>825,037</b>          |

Total Project 3.a.iii AVs Awarded: 10 out of 16

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| Domain 1 Project Milestones - Project 3.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         |
|   | <i>Enter Reviewer Comment</i>                                      |                   |                    |                  |                 |             |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.iii**

|              |   |         |     |            |                |             |
|--------------|---|---------|-----|------------|----------------|-------------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00        |
|              | Enter Reviewer Comment                  |         |     |            |                |             |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Fail           | 0           |
|              | Enter Reviewer Comment                  |         |     |            |                |             |
| <b>Total</b> |   |         |     |            |                | <b>0.00</b> |

**Domain 1 Project Prescribed Milestones - Project 3.a.iii**

| AV Driving             | Project Requirement and Metric/Deliverable  | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------------------|---|-------------------|--------------------|------------------|-----------------|-------------|
| ●                      | 1. Develop a medication adherence program to improve behavioral health medication adherence through culturally-competent health literacy initiatives including methods based on the Fund for Public Health NY's Medication Adherence Project (MAP). | 3/31/2018         | 3/31/2018          | Completed        | Pass & Complete | N/A         |
| Enter Reviewer Comment |   |                   |                    |                  |                 |             |
| ●                      | 2. Form care teams including practitioners, care managers including Health Home care managers, social workers and pharmacists who are engaged with the behavioral health population.  | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| Enter Reviewer Comment |   |                   |                    |                  |                 |             |
| ●                      | 3. Use EHRs or other technical platforms to track all patients engaged in this project.   | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| Enter Reviewer Comment |   |                   |                    |                  |                 |             |
| ●                      | 4. Coordinate with Medicaid Managed Care Plans to improve medication adherence.   | 3/31/2018         | 3/31/2018          | Completed        | Pass & Complete | N/A         |
| Enter Reviewer Comment |   |                   |                    |                  |                 |             |
| <b>Total</b>           |   |                   |                    |                  |                 | <b>0.00</b> |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.a.iii

| Domain 3 Pay for Reporting |  |                 |             |
|----------------------------|--|-----------------|-------------|
| AV Driving                 | Measure  | Reviewer Status | AVs Awarded |
| ●                          | Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | Pass & Ongoing  | 0.5         |
|                            | P4R Measure DY4, Q2  |                 |             |
| ●                          | Follow-up care for Children Prescribed ADHD Medications - Initiation Phase   | Pass & Ongoing  | 0.5         |
|                            | P4R Measure DY4, Q2  |                 |             |
| ●                          | Screening for Clinical Depression and follow-up                              | Pass & Ongoing  | 1           |
|                            | P4R Measure DY4, Q2  |                 |             |
| <b>Total</b>               |  |                 | <b>2.00</b> |

| Domain 3 Pay for Performance |  |                 |             |
|------------------------------|--|-----------------|-------------|
| AV Driving                   | Measure  | Reviewer Status | AVs Awarded |
| ●                            | Adherence to Antipsychotic Medications for People with Schizophrenia   | Fail            | 0           |
|                              | P4P Measure DY4, Q2  |                 |             |
| ●                            | Antidepressant Medication Management - Effective Acute Phase Treatment | Pass & Ongoing  | 0.5         |
|                              | P4P Measure DY4, Q2  |                 |             |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.a.iii**

|              |  |                |             |
|--------------|--|----------------|-------------|
| ●            | Antidepressant Medication Management - Effective Continuation Phase Treatment                              | Pass & Ongoing | 0.5         |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia                         | Pass & Ongoing | 1           |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Diabetes Monitoring for People with Diabetes and Schizophrenia   | Fail           | 0           |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Fail           | 0           |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Follow-up after hospitalization for Mental Illness - within 30 days  | Pass & Ongoing | 0.5         |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Follow-up after hospitalization for Mental Illness - within 7 days   | Pass & Ongoing | 0.5         |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)         | Pass & Ongoing | 0.5         |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)                         | Pass & Ongoing | 0.5         |
|              | P4P Measure DY4, Q2  |                |             |
| ●            | Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±                      | Please Select  | 0           |
|              | P4P Measure DY4, Q2  |                |             |
| <b>Total</b> |  |                | <b>4.00</b> |





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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - 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 | \$ 384,402 |
| DY4, Q2 Payment Earned    | \$ 298,979 |

| 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          | 4.00            | 80%           | 20%                    | 67%                        | 256,268                | 170,845                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 0.00            | 0%            |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>4.00</b>     | <b>67%</b>    | <b>20%</b>             | <b>67%</b>                 | <b>256,268</b>         | <b>170,845</b>          |
| Domain 3                 | Domain 3 Pay for Reporting (P4R)   | Complete        | 8.00          | 8.00            | 100%          | 10%                    | 33%                        | 128,134                | 128,134                 |
|                          | Domain 3 Pay for Performance (P4P) |                 | 0.00          | 0.00            | N/A           | 70%                    | 0%                         | -                      | -                       |
| <b>Domain 3 Subtotal</b> |                                    |                 | <b>8.00</b>   | <b>8.00</b>     | <b>100%</b>   | <b>80%</b>             | <b>33%</b>                 | <b>128,134</b>         | <b>128,134</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>14.00</b>  | <b>12.00</b>    | <b>86%</b>    | <b>100%</b>            | <b>100%</b>                | <b>384,402</b>         | <b>298,979</b>          |

Total Project 3.b.i AVs Awarded: 12 out of 14

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| 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 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.b.i**

|              |   |         |     |            |                |             |
|--------------|---|---------|-----|------------|----------------|-------------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00        |
|              | Enter Reviewer Comment                  |         |     |            |                |             |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Fail           | 0           |
|              | Enter Reviewer Comment                  |         |     |            |                |             |
| <b>Total</b> |   |         |     |            |                | <b>0.00</b> |

**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.   | 3/31/2018         | 3/31/2018          | Completed        | Pass & Complete | 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. | 3/31/2018         | 3/31/2018          | Completed        | Fail            | 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.   | 3/31/2018         | 3/31/2018          | Completed        | Fail            | N/A         |
| Enter Reviewer Comment |  |                   |                    |                  |                 |             |
| ●                      | 4. Use EHRs or other technical platforms to track all patients engaged in this project.  | 3/31/2017         | 3/31/2017          | Completed        | Pass & Complete | N/A         |
| Enter Reviewer Comment |  |                   |                    |                  |                 |             |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.b.i

|                               |  |           |           |           |                 |     |
|-------------------------------|--|-----------|-----------|-----------|-----------------|-----|
| ●                             | 5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).  | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 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. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.  | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 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.   | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 11. Prescribe once-daily regimens or fixed-dose combination pills when appropriate.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| <i>Enter Reviewer Comment</i> |  |           |           |           |                 |     |
| ●                             | 12. Document patient driven self-management goals in the medical record and review with patients at each visit.  | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.b.i

|   |  |           |           |           |                 |     |
|---|--|-----------|-----------|-----------|-----------------|-----|
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.                 | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 14. Develop and implement protocols for home blood pressure monitoring with follow up support.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.                             | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 16. Facilitate referrals to NYS Smoker's Quitline.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 18. Adopt strategies from the Million Hearts Campaign.   | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.  | 3/31/2018 | 3/31/2018 | Completed | Pass & Complete | N/A |
|   | <i>Enter Reviewer Comment</i>  |           |           |           |                 |     |
| ● | 20. Engage a majority (at least 80%) of primary care providers in this project.  | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.b.i**

|              |                               |
|--------------|-------------------------------|
|              | <i>Enter Reviewer Comment</i> |
| <b>Total</b> | <b>0.00</b>                   |

**Domain 3 Pay for Performance and Pay for Reporting**

| AV Driving | Measure  | Reviewer Status | AVs Awarded |
|------------|--|-----------------|-------------|
| ●          | Aspirin Use  | Pass & Ongoing  | 0.5         |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Discussion of Risks and Benefits of Aspirin Use  | Pass & Ongoing  | 0.5         |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Controlling High Blood Pressure  | Pass & Ongoing  | 1           |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Flu Shots for Adults Ages 18 – 64  | Pass & Ongoing  | 1           |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Health Literacy (QHL13, 14, and 16)  | Pass & Ongoing  | 1           |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit                | Pass & Ongoing  | 0.3333333   |
|            | P4R Measure DY4, Q2  |                 |             |
| ●          | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing  | 0.3333333   |



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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.b.i*

|              |  |                |             |
|--------------|--|----------------|-------------|
| ●            | P4R Measure DY4, Q2  |                |             |
| ●            | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333   |
|              | P4R Measure DY4, Q2  |                |             |
| ●            | Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy          | Pass & Ongoing | 0.5         |
|              | P4R Measure DY4, Q2  |                |             |
| ●            | Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%             | Pass & Ongoing | 0.5         |
|              | P4R Measure DY4, Q2  |                |             |
| ●            | Prevention Quality Indicator # 8 (Heart Failure) ±   | Pass & Ongoing | 1           |
|              | P4R Measure in DY4, Q2   |                |             |
| ●            | Prevention Quality Indicator # 7 (HTN) ±   | Pass & Ongoing | 1           |
|              | P4R Measure DY4, Q2  |                |             |
| <b>Total</b> |  |                | <b>8.00</b> |

















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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.c.i

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

| Payment Snapshot          |            |
|---------------------------|------------|
| DY4, Q2 Payment Available | \$ 399,543 |
| DY4, Q2 Payment Earned    | \$ 355,150 |

| 3.c.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          | 4.00            | 80%           | 20%                    | 67%                        | 266,362                | 221,968                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | Complete        | 1.00          | 1.00            | 100%          |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>5.00</b>     | <b>83%</b>    | <b>20%</b>             | <b>67%</b>                 | <b>266,362</b>         | <b>221,968</b>          |
| Domain 3                 | Domain 3 Pay for Reporting (P4R)   | Complete        | 6.00          | 6.00            | 100%          | 10%                    | 33%                        | 133,181                | 133,181                 |
|                          | Domain 3 Pay for Performance (P4P) |                 | 0.00          | 0.00            | N/A           | 70%                    | 0%                         | -                      | -                       |
| <b>Domain 2 Subtotal</b> |                                    |                 | <b>6.00</b>   | <b>6.00</b>     | <b>100%</b>   | <b>80%</b>             | <b>33%</b>                 | <b>133,181</b>         | <b>133,181</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>12.00</b>  | <b>11.00</b>    | <b>92%</b>    | <b>100%</b>            | <b>100%</b>                | <b>399,543</b>         | <b>355,150</b>          |

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

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



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.c.i**

|              |   |         |     |            |                |             |
|--------------|---|---------|-----|------------|----------------|-------------|
| ●            | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00        |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                |             |
| ●            | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing | 1           |
|              | <i>Enter Reviewer Comment</i>           |         |     |            |                |             |
| <b>Total</b> |   |         |     |            |                | <b>1.00</b> |

**Domain 1 Project Prescribed Milestones - Project 3.c.i**

| AV Driving | Project Requirement and Metric/Deliverable   | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
|------------|--|--------------------|------------------|-----------------|-------------|
| ●          | 1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.  | 3/31/2018          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                    |                  |                 |             |
| ●          | 2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.   | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                    |                  |                 |             |
| ●          | 3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management. | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                    |                  |                 |             |
| ●          | 4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.  | 3/31/2017          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                    |                  |                 |             |
| ●          | 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.   | 3/31/2018          | Completed        | Pass & Complete | N/A         |
|            | <i>Enter Reviewer Comment</i>  |                    |                  |                 |             |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 3.c.i**

|  |                               |           |                 |             |  |
|--|-------------------------------|-----------|-----------------|-------------|--|
|  | <i>Enter Reviewer Comment</i> |           |                 |             |  |
| 6. Use EHRs or other technical platforms to track all patients engaged in this project.  | 3/31/2017                     | Completed | Pass & Complete | N/A         |  |
| <i>Enter Reviewer Comment</i>  |                               |           |                 |             |  |
| 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers. | 3/31/2018                     | Completed | Fail            | N/A         |  |
| <i>Enter Reviewer Comment</i>  |                               |           |                 |             |  |
| <b>Total</b>   |                               |           |                 | <b>0.00</b> |  |

| Domain 3 Pay for Performance and Pay for Reporting |   |                 |             |
|--|---|-----------------|-------------|
| AV Driving   | Measure   | Reviewer Status | AVs Awarded |
|  | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±                                      | Pass & Ongoing  | 1           |
| P4R Measure in DY4, Q2                             |   |                 |             |
|  | Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor) | Pass & Ongoing  | 1           |
| P4R Measure in DY4, Q2                             |   |                 |             |
|  | Flu Shots for Adults Ages 18 – 64   | Pass & Ongoing  | 1           |
| P4R Measure in DY4, Q2                             |   |                 |             |
|  | Health Literacy (QHL13, 14, and 16)   | Pass & Ongoing  | 1           |
| P4R Measure in DY4, Q2                             |   |                 |             |
|  | Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit                                     | Pass & Ongoing  | 0.3333333   |



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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 3.c.i*

|              |  |                |             |
|--------------|--|----------------|-------------|
| ●            | P4R Measure in DY4, Q2   |                |             |
| ●            | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333   |
|              | P4R Measure in DY4, Q2   |                |             |
| ●            | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333   |
|              | P4R Measure in DY4, Q2   |                |             |
| ●            | Prevention Quality Indicator # 1 (DM Short term complication) ±                            | Pass & Ongoing | 1           |
|              | P4R Measure in DY4, Q2   |                |             |
| <b>Total</b> |  |                | <b>6.00</b> |













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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)**  
**Mount Sinai PPS, LLC - Project 4.b.ii**

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

| Payment Snapshot                 |               |
|----------------------------------|---------------|
| <b>DY4, Q2 Payment Available</b> | \$ 846,506 ## |
| <b>DY4, Q2 Payment Earned</b>    | \$ 812,646    |

| 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          | 4.00            | 80%           | 20%                    | 20%                        | 169,301                | 135,441                 |
|                          | Project Implementation Speed       | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | N/A             | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |                 | <b>5.00</b>   | <b>4.00</b>     | <b>80%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>169,301</b>         | <b>135,441</b>          |
| Domain 4                 | Domain 4 Pay for Reporting (P4R)   | Complete        | 17.00         | 17.00           | 100%          | 80%                    | 80%                        | 677,205                | 677,205                 |
|                          | Domain 4 Pay for Performance (P4P) | N/A             | N/A           | N/A             | N/A           | 0%                     | 0%                         | -                      | -                       |
| <b>Domain 4 Subtotal</b> |                                    |                 | <b>17.00</b>  | <b>17.00</b>    | <b>100%</b>   | <b>80%</b>             | <b>80%</b>                 | <b>677,205</b>         | <b>677,205</b>          |
| <b>Total</b>             |                                    | <b>Complete</b> | <b>22.00</b>  | <b>21.00</b>    | <b>95%</b>    | <b>100%</b>            | <b>100%</b>                | <b>846,506</b>         | <b>812,646</b>          |

Total Project 4.b.ii AVs Awarded: 21 out of 22

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| 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 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 4.b.ii**

|                               |  |                |   |
|-------------------------------|--|----------------|---|
| ●                             | Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics                        | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics                                  | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics           | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Percentage of adults with health insurance - Aged 18- 64 years   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years                                       | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Percentage of adults who are obese   | Pass & Ongoing | 1 |
| <i>Enter Reviewer Comment</i> |  |                |   |
| ●                             | Percentage of children and adolescents who are obese   | Pass & Ongoing | 1 |



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**Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 4.b.ii**

|              |   |                |              |
|--------------|---|----------------|--------------|
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Percentage of cigarette smoking among adults  | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Asthma emergency department visit rate per 10,000   | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Asthma emergency department visit rate per 10,000 - Aged 0-4 years  | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Age-adjusted heart attack hospitalization rate per 10,000   | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years                       | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| ●            | Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years                         | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>   |                |              |
| <b>Total</b> |   |                | <b>17.00</b> |



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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 4.c.ii

| Project Snapshot |  |
|------------------|--|
| Project Domain   | Domain 4: Population-wide Projects: New York's       |
| Project ID       | 4.c.ii   |
| Project Title    | Increase early access to, and retention in, HIV care |

| Payment Snapshot          |            |
|---------------------------|------------|
| DY4, Q2 Payment Available | \$ 940,120 |
| DY4, Q2 Payment Earned    | \$ 902,515 |

| 4.c.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          | 4.00            | 80%           | 20%                    | 20%                        | 188,024                | 150,419                 |
|                          | Project Implementation Speed       | N/A           | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
|                          | Patient Engagement Speed           | N/A           | 0.00          | 0.00            | 0%            |                        |                            |                        |                         |
| <b>Domain 1 Subtotal</b> |                                    |               | <b>5.00</b>   | <b>4.00</b>     | <b>80%</b>    | <b>20%</b>             | <b>20%</b>                 | <b>188,024</b>         | <b>150,419</b>          |
| Domain 4                 | Domain 4 Pay for Reporting (P4R)   | Complete      | 11.00         | 11.00           | 100%          | 80%                    | 80%                        | 752,096                | 752,096                 |
|                          | Domain 4 Pay for Performance (P4P) | N/A           | N/A           | N/A             | N/A           | 0%                     | 0%                         | -                      | -                       |
| <b>Domain 4 Subtotal</b> |                                    |               | <b>11.00</b>  | <b>11.00</b>    | <b>100%</b>   | <b>80%</b>             | <b>80%</b>                 | <b>752,096</b>         | <b>752,096</b>          |
| <b>Total</b>             |                                    |               | <b>16.00</b>  | <b>15.00</b>    | <b>94%</b>    | <b>100%</b>            | <b>100%</b>                | <b>940,120</b>         | <b>902,515</b>          |

Total Project 4.c.ii AVs Awarded: 15 out of 16

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





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Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter) Mount Sinai PPS, LLC - Project 4.c.ii

|   |   |                |   |
|---|---|----------------|---|
| ● | Newly diagnosed HIV case rate per 100,000   | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses      | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses   | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Percentage of adults with health insurance - Aged 18- 64 years  | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Percentage of premature death (before age 65 years)   | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics           | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |
| ● | Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years                | Pass & Ongoing | 1 |
|   | <i>Enter Reviewer Comment</i>   |                |   |



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*Achievement Value (AV) Scorecard DY4, Q2 January 1, 2018 - March 31, 2018 (Payment Quarter)  
Mount Sinai PPS, LLC - Project 4.c.ii*

|              |  |                |              |
|--------------|--|----------------|--------------|
| ●            | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years   | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>  |                |              |
| ●            | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1            |
|              | <i>Enter Reviewer Comment</i>  |                |              |
| <b>Total</b> |  |                | <b>11.00</b> |





