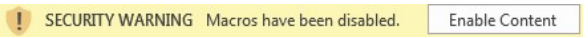
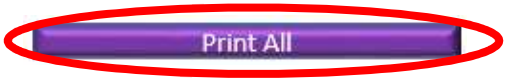
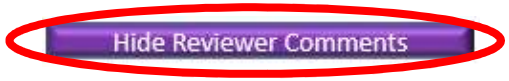
New York State Department of Health
Delivery System Reform Incentive Payment (DSRIP) Program

Achievement Value (AV) Scorecard
The New York and Presbyterian Hospital

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

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

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Print Summary

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Achievement Value (AV) Scorecard
The New York and Presbyterian Hospital

PPS Information	
Quarter	DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
PPS	The New York and Presbyterian Hospital
PPS Number	39

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	5.00	0.00	5.00	*Organizational funds are embedded within each project's payment*	
2.a.i	28.00	23.33	0.00	23.33	$ 899,610	$ 521,774
2.b.i	29.00	24.33	0.00	24.33	$ 631,015	$ 365,989
2.b.iii	29.00	23.33	0.00	23.33	$ 694,651	$ 379,743
2.b.iv	29.00	24.33	0.00	24.33	$ 644,554	$ 373,841
3.a.i	15.00	10.50	0.00	10.50	$ 562,760	$ 347,035
3.a.ii	15.00	10.50	0.00	10.50	$ 558,551	$ 344,440
3.e.i	13.00	12.00	0.00	12.00	$ 490,790	$ 404,901
3.g.i	11.00	11.00	0.00	11.00	$ 104,124	$ 104,124
4.b.i	22.00	22.00	0.00	22.00	$ 398,793	$ 398,793
4.c.i	16.00	16.00	0.00	16.00	$ 333,036	$ 333,036

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AV Adjustments (Column F)						
Total	**207.00**	**177.33**	**0.00**	**177.33**	**$ 5,317,884**	**$ 3,573,676**

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Save & Return

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
The New York and Presbyterian Hospital - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

Workforce Strategy							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Workforce Strategy Budget Updates							

Additional Workforce Strategy Budget Updates (non AV-driving)		1. Define target workforce state (in line with DSRIP program's goals)	3/31/2016	N/A	Completed	Pass & Complete	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	9/30/2016	N/A	Completed	Pass & Complete	
		4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	6/30/2016	N/A	Completed	Pass & Complete	
		5. Develop training strategy	12/31/2016	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	

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Additional 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	
Total							**1**

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 DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
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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	
Total							**1**

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	

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,	3/31/2016	N/A	Completed	Pass & Complete	N/A
		6. Finalize partnership agreements or contracts with CBOs	9/30/2016	N/A	Completed	Pass & Complete	
		7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	3/31/2016	N/A	Completed	Pass & Complete	
		8. Finalize workforce communication and engagement plan	12/31/2015	N/A	Completed	Pass & Complete	
		9. Inclusion of CBOs in PPS Implementation	3/31/2017	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

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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	
Total							**1**

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	1
		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	

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		4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete	
Additional Financial Stability Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

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

	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 05 - IT Systems and Processes							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
IT Systems and Processes	●	1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	3/31/2016	N/A	Complete	Pass & Complete	N/A
	●	2. Develop an IT Change Management Strategy.	N/A	N/A	In Process	Pass & Ongoing	
	●	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	12/31/2016	N/A	Complete	Pass & Complete	
	●	5. Develop a data security and confidentiality plan.	N/A	N/A	In Process	Pass & Ongoing	

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	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 06 - Performance Reporting							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Performanc		1. Establish reporting structure for PPS-wide performance reporting and communication.	3/31/2016	N/A	Completed	Pass & Coomplete	N/A

Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2016	N/A	Completed	Pass (with Exception) & Complete	N/A
Additional Performanc e Reporting Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 07 - Practitioner Engagement

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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	
Additional Practitioner Engagement Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 08 - Population Health Management							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Population Health	●	1. Develop population health management roadmap.	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	N/A
Additional Population Health Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	

	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 09 - Clinical Integration							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Clinical Integration	●	1. Perform a clinical integration 'needs assessment'.	3/31/2017	N/A	Completed	Pass & Complete	N/A
	●	2. Develop a Clinical Integration strategy.	3/31/2017	N/A	In Process	Pass & Complete	N/A
Additional Clinical	●	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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Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital 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	50.00	100%	0.00	50.00	100%
Project Adjustments (applied to one project only)	Various	10.00	157.00	127.33	81%	0.00	127.33	81%
Total			**207.00**	**177.33**	**86%**	**0.00**	**177.33**	**86%**

Hide Reviewer Comments

☐ Organizational ☐ Project Adjustments

No AV Adjustments	
	Please note that there are no AV adjustments for The New York and Presbyterian Hospital in DY2, Q1

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

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

Payment Snapshot		
DY4, Q2 Payment Available	$	899,610
DY4, Q2 Payment Earned	$	521,774

2.a.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	179,922	179,922
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**20%**	**20%**	**179,922**	**179,922**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	71,969	71,969
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.33	42%	72%	72%	647,719	269,883
Domain 2 Subtotal			**23.00**	**18.33**	**80%**	**80%**	**80%**	**719,688**	**341,852**
Total		**Complete**	**28.00**	**23.33**	**83%**	**100%**	**100%**	**899,610**	**521,774**

Total Project 2.a.i AVs Awarded: 23.33 out of 28

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.i

AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A		Pass & Ongoing	N/A
	Enter Reviewer Comment					
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00

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The New York and Presbyterian Hospital - Project 2.a.i

	Enter Reviewer Comment	
Total		**0.00**

Domain 1 Project Prescribed Milestones - Project 2.a.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Fail	N/A
	Enter Reviewer Comment					
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	N/A

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

	Enter Reviewer Comment					
●	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A
	Enter Reviewer Comment					
●	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total						**0.00**

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

AV Driving	Measure	Reviewer Status	AVs Awarded
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Enter Reviewer Comment		
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

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

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Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

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

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	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	*Please Select*	0

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.a.i

	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	*Please Select*	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	*Please Select*	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**3.33**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.i

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.i
Project Title	Ambulatory ICUs

Payment Snapshot		
DY4, Q2 Payment Available	$	631,015
DY4, Q2 Payment Earned	$	365,989

2.b.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	126,203	126,203
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**20%**	**20%**	**126,203**	**126,203**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	50,481	50,481
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.33	42%	72%	72%	454,331	189,305
Domain 2 Subtotal			**23.00**	**18.33**	**80%**	**80%**	**80%**	**504,812**	**239,786**
Total		**Complete**	**29.00**	**24.33**	**84%**	**100%**	**100%**	**631,015**	**365,989**

Total Project 2.b.i AVs Awarded: 24.33 out of 29

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Domain 1 Project Milestones - Project 2.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 DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.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	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	4. Establish care managers co-located at each Ambulatory ICU site.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					

●	5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	6. Ensure that EHR systems used by participating providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	N/A
	Enter Reviewer Comment					
●	7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-management.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the input of multiple providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care and utilization.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A
	Enter Reviewer Comment					
Total						**0.00**

Domain 2 Pay for Reporting - Project 2.b.i

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.i

AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.i

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

Domain 2 Pay for Performance - Project 2.b.i			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.i

	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	*Please Select*	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	*Please Select*	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**3.33**

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Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iii

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

Payment Snapshot		
DY4, Q2 Payment Available	$	694,651
DY4, Q2 Payment Earned	$	379,743

2.b.iii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	138,930	115,775
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**6.00**	**5.00**	**83%**	**20%**	**20%**	**138,930**	**115,775**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	55,572	55,572
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.33	42%	72%	72%	500,149	208,395
Domain 2 Subtotal			**23.00**	**18.33**	**80%**	**80%**	**80%**	**555,721**	**263,967**
Total		**Complete**	**29.00**	**23.33**	**80%**	**100%**	**100%**	**694,651**	**379,743**

Total Project 2.b.iii AVs Awarded: 23.33 out of 29

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Domain 1 Project Milestones - Project 2.b.iii

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iii

●	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 2.b.iii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					

	3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2017	3/31/2017	Completed	Pass (with Exception) & Complete	N/A
	Enter Reviewer Comment					
	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total						**0.00**

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

	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1

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

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

Domain 2 Pay for Performance - Project 2.b.iii			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	*Please Select*	0
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iii

●	Children's Access to Primary Care- 7 to 11 years	*Please Select*	0
	Enter Reviewer Comment		
●	Children's Access to Primary Care- 12 to 19 years	*Please Select*	0
	Enter Reviewer Comment		
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
●	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
●	Potentially Avoidable Emergency Room Visits	*Please Select*	0
	Enter Reviewer Comment		
●	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
●	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**3.33**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - 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	$	644,554
DY4, Q2 Payment Earned	$	373,841

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	5.00	100%	20%	20%	128,911	128,911
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**20%**	**20%**	**128,911**	**128,911**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	51,564	51,564
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.33	42%	72%	72%	464,079	193,366
Domain 2 Subtotal			**23.00**	**18.33**	**80%**	**80%**	**80%**	**515,643**	**244,931**
Total		**Complete**	**29.00**	**24.33**	**84%**	**100%**	**100%**	**644,554**	**373,841**

Total Project 2.b.iv AVs Awarded: 24.33 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					

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

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

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The New York and Presbyterian Hospital - 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
	Enter Reviewer Comment					
●	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total						**0.00**

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
	Enter Reviewer Comment		
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iv

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

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iv

	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		**15.00**

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	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	*Please Select*	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	*Please Select*	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	*Please Select*	0

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 2.b.iv

	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**3.33**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - 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	$	562,760
DY4, Q2 Payment Earned	$	347,035

3.a.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	112,552	93,793
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**6.00**	**5.00**	**83%**	**20%**	**20%**	**112,552**	**93,793**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	56,276	56,276
	Domain 3 Pay for Performance		7.00	3.50	50%	70%	70%	393,932	196,966
Domain 3 Subtotal			**9.00**	**5.50**	**61%**	**80%**	**80%**	**450,208**	**253,242**
Total		**Complete**	**15.00**	**10.50**	**70%**	**100%**	**100%**	**562,760**	**347,035**

Total Project 3.a.i AVs Awarded: 10.5 out of 15

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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 DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - 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	Fail	0
	Enter Reviewer Comment					
Total						**1**

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3

☐ 3.a.i Model 1 ☑ 3.a.i Model 2 ☐ 3.a.i Model 3

Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
3.a.i Model 2	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Enter Reviewer Comment					
	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
	●	7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Enter Reviewer Comment					
	●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					

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The New York and Presbyterian Hospital - Project 3.a.i

Total	0

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		
Total			**2.00**

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	Fail	0
	P4P Measure DY4, Q2		
●	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	P4P Measure DY4, Q2		
●	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	P4P Measure DY4, Q2		
●	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1

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The New York and Presbyterian Hospital - Project 3.a.i

	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)	Fail	0
	P4P Measure DY4, Q2		
●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
	P4P Measure DY4, Q2		
●	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	*Please Select*	0
	P4P Measure DY4, Q2		
Total			**3.50**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.a.ii

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

Payment Snapshot		
DY4, Q2 Payment Available	$	558,551
DY4, Q2 Payment Earned	$	344,440

3.a.ii Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	111,710	93,092
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**6.00**	**5.00**	**83%**	**20%**	**20%**	**111,710**	**93,092**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	55,855	55,855
	Domain 3 Pay for Performance (P4P)		7.00	3.50	50%	70%	70%	390,986	195,493
Domain 2 Subtotal			**9.00**	**5.50**	**61%**	**80%**	**80%**	**446,841**	**251,348**
Total		**Complete**	**15.00**	**10.50**	**70%**	**100%**	**100%**	**558,551**	**344,440**

Total Project 3.a.ii AVs Awarded: 10.5 out of 15

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Domain 1 Project Milestones - Project 3.a.ii

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.a.ii

●	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Fail	0
	Enter Reviewer Comment					
Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 3.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.a.ii

	Enter Reviewer Comment					
●	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total						**0.00**

Domain 3 Pay for Reporting

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The New York and Presbyterian Hospital - Project 3.a.ii

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		
Total			**2.00**

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	Fail	0
	P4P Measure DY4, Q2		

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The New York and Presbyterian Hospital - Project 3.a.ii

●	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	P4P Measure DY4, Q2		
●	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	P4P Measure DY4, Q2		
●	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	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)	Fail	0
	P4P Measure DY4, Q2		
●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
	P4P Measure DY4, Q2		
●	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	*Please Select*	0
	P4P Measure DY4, Q2		
Total			**3.50**

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Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.e.i

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.e.i
Project Title	Comprehensive project to decrease HIV/AIDS transmission—development of Center of Excellence management of HIV/AIDS

Payment Snapshot		
DY4, Q2 Payment Available	$	490,790
DY4, Q2 Payment Earned	$	404,901

3.e.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	98,158	98,158
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**20%**	**20%**	**98,158**	**98,158**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	3.00	3.00	100%	10%	10%	49,079	49,079
	Domain 3 Pay for Performance		4.00	3.00	75%	70%	70%	343,553	257,665
Domain 3 Subtotal			**7.00**	**6.00**	**86%**	**80%**	**80%**	**392,632**	**306,744**
Total		**Complete**	**13.00**	**12.00**	**92%**	**100%**	**100%**	**490,790**	**404,901**

Total Project 3.e.i AVs Awarded: 12 out of 13

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Domain 1 Project Milestones - Project 3.e.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					

●	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0
	Enter Reviewer Comment					
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						**1**

Domain 1 Project Prescribed Milestones - Project 3.e.i Models 1, 2 and 3

☐ 3.e.i Model 1 ☑ 3.e.i Model 2

Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	●	8. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
	●	9. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
	●	10. Co-locate care management services including Health Home care managers for those eligible for Health Homes.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					

3.e.i Model 2		11. Develop a referral process and connectivity for referrals of people who qualify for but are not yet in a Health Home.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		12. Ensure understanding and compliance with evidence-based guidelines for management of HIV/AIDS (and HCV)	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		13. Ensure coordination of care between all available services preferably through a single electronic health/medical/care management record.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		14. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look ups, by the end of DY 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		15. Ensure that EHR systems or other IT platforms, used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		16. Use EHRs or other IT 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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The New York and Presbyterian Hospital - Project 3.e.i

		17. Seek designation as center of excellence from New York State Department of Health.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
Total							**0**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.e.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
	Cervical Cancer Screening	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
	P4R Measure DY4, Q2		
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
	P4R Measure DY4, Q2		
	Viral Load Suppression	Pass & Ongoing	1
	P4R Measure DY4, Q2		
Total			**3**

Domain 3 Pay for Performance and Pay for Reporting - Project (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.e.i

	HIV/AIDS Comprehensive Care : Engaged in Care	Fail	0
	P4P Measure DY4, Q2		
	HIV/AIDS Comprehensive Care : Syphilis Screening	Pass & Ongoing	1
	P4P Measure DY4, Q2		
	HIV/AIDS Comprehensive Care : Viral Load Monitoring	Pass & Ongoing	1
	P4P Measure DY4, Q2		
	Chlamydia Screening (16 – 24 Years)	Pass & Ongoing	1
	P4P Measure DY4, Q2		
Total			**3**

NEW YORK STATE | Department of Health | Medicaid Redesign Team

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.g.i

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.g.i
Project Title	Integration of palliative care into the PCMH model

Payment Snapshot		
DY4, Q2 Payment Available	$	104,124
DY4, Q2 Payment Earned	$	104,124

3.g.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	67%	69,416	69,416
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**20%**	**67%**	**69,416**	**69,416**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	33%	34,708	34,708
	Domain 3 Pay for Performance (P4P)	N/A	N/A			70%	0%	-	-
Domain 2 Subtotal			**5.00**	**5.00**	**100%**	**80%**	**33%**	**34,708**	**34,708**
Total		**Complete**	**11.00**	**11.00**	**100%**	**100%**	**100%**	**104,124**	**104,124**

Total Project 3.g.i AVs Awarded: 11 out of 11

Hide Reviewer Comments

Domain 1 Project Milestones - Project 3.g.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 DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 3.g.i

●	Module 2 - Project Implementation Speed	3/17/2017	3/17/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 3.g.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
●	2. Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	Completed	Fail	N/A
●	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
●	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
●	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	Completed	Fail	N/A

●	6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Percentage of members who remained stable or demonstrated improvement in pain	Pass & Ongoing	1
●	Advanced Directives – Talked about Appointing for Health Decisions	Pass & Ongoing	1
●	Percentage of members whose pain was not controlled ±	Pass & Ongoing	1
●	Depressive feelings - percentage of members who experienced some depression feeling ±	Pass & Ongoing	1
●	Percentage of members who had severe or more intense daily pain ±	Pass & Ongoing	1
Total			**5.00**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 4.b.i

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

Payment Snapshot		
DY4, Q2 Payment Available	$	398,793
DY4, Q2 Payment Earned	$	398,793

4.b.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	79,759	79,759
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**20%**	**20%**	**79,759**	**79,759**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	80%	80%	319,034	319,034
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			**17.00**	**17.00**	**100%**	**80%**	**80%**	**319,034**	**319,034**
Total		**Complete**	**22.00**	**22.00**	**100%**	**100%**	**100%**	**398,793**	**398,793**

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

Hide Reviewer Comments

Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY2)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 4.b.i

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 4.b.i

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 4.c.i

Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.c.i
Project Title	Decrease HIV morbidity

Payment Snapshot		
DY4, Q2 Payment Available	$	333,036
DY4, Q2 Payment Earned	$	333,036

4.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	5.00	100%	20%	20%	66,607	66,607
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**5.00**	**5.00**	**100%**	**20%**	**20%**	**66,607**	**66,607**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	266,429	266,429
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			**11.00**	**11.00**	**100%**	**80%**	**80%**	**266,429**	**266,429**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**100%**	**333,036**	**333,036**

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

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

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York and Presbyterian Hospital - Project 4.c.i

	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		
Total			**11.00**