

### 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.	SECURITY WARNING Macros have been disabled. Enable Content
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.	Print All
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	Project lisk (edits on the purple final better or access each individual project report)  Dominani-Organizational fold Projectal  AV Adjustments (column 1)  2 at  2 at  2 at  3 av  2 at  3 av  3 av  4 av  3 av  4 av  4 av  5 av  6 begartment of Health  8 dedesign Team  Print  Print
3. Show or Hide reviewer comments	Scorecard Overview 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.	Hide Reviewer Comments



Print Summary

Print All

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

PPS Information					
Quarter	DY4, Q4 January 1, 2019 - March 31, 2019 (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		AV [			Payme	Payment Data			
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY4, Q4 Payment Available	DY4, Q4 Payment Earned			
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment			
2.a.i	20.00	10.00	0.00	10.00	\$ 899,610	\$ 251,891			
2.b.i	21.00	11.00	0.00	11.00	\$ 631,015	\$ 176,684			
2.b.iii	21.00	10.00	0.00	10.00	\$ 694,651	\$ 171,347			
2.b.iv	21.00	11.00	0.00	11.00	\$ 644,554	\$ 180,475			
3.a.i	25.00	18.50	0.00	18.50	\$ 562,760	\$ 303,265			
3.a.ii	25.00	18.50	0.00	18.50	\$ 558,551	\$ 300,997			
3.e.i	13.00	15.33	0.00	15.33	\$ 490,790	\$ 294,474			
3.g.i	11.00	11.00	0.00	11.00	\$ 590,035	\$ 590,035			
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			



Print Summary

Print All

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

AV Adjustments (Column F)						
Total	195.00	143.33	0.00	143.33 \$	5,803,796 \$	3,000,997



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (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									



Workforce Strategy Budget Updates (non AV- driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  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  5. Develop training strategy  Major Risks to Implementation & Risk Mitigation Strategies  N/A Completed  Pass & Complete  Pass & Complete	with DSRIP program's goals)  2. Create a workforce transition roadmap for achieving defined target workforce  3. Perform detailed gap analysis between current state assessment of workforce and projected future state  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  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  5. Develop training strategy  Major Risks to Implementation & Risk  N/A  N/A  In Process  Pass & Complete  Pass & Complete							
Additional Workforce Strategy Budget Updates (non AV- driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  5. Develop training strategy  Major Risks to Implementation & Risk Mitigation Strategies  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/	for achieving defined target workforce  3. Perform detailed gap analysis between current state assessment of workforce and projected future state  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  5. Develop training strategy  Major Risks to Implementation & Risk Mitigation Strategies  Major Dependencies on Organizational  N/A N/A In Process  Pass & Ongoing  N/A N/A In Process  Pass & Ongoing  N/A N/A In Process  Pass & Ongoing				3/31/2016	N/A	Completed	Pass & Complete
Workforce Strategy Budget Updates (non AV-driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  5. Develop training strategy  Major Risks to Implementation & Risk Mitigation Strategies  Mitigation Strategies  N/A Completed  Pass & Complete	A. 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  5. Develop training strategy  Major Risks to Implementation & Risk Mitigation Strategies  Major Dependencies on Organizational  Major Dependencies on Organizational  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/		•	• 1	N/A	N/A	In Process	Pass & Ongoing
Budget Updates (non AV- driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  5. Develop training strategy  12/31/2016  N/A  Completed  Pass & Complete  Pass & Complete  Major Risks to Implementation & Risk Mitigation Strategies  N/A  N/A  In Process  Pass & Ongoing	A. 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  5. Develop training strategy  12/31/2016  N/A  Completed  Pass & Complete  Major Risks to Implementation & Risk Mitigation Strategies  Major Dependencies on Organizational  N/A  N/A  N/A  In Process  Pass & Ongoing	Workforce	•	current state assessment of workforce and	9/30/2016	N/A	Completed	Pass & Complete
(non AV-driving)  analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  5. Develop training strategy  12/31/2016  N/A  Completed  Pass & Complete  Pass & Complete  Major Risks to Implementation & Risk Mitigation Strategies  N/A  N/A  In Process  Pass & Ongoing	analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  5. Develop training strategy  12/31/2016  N/A  Completed  Pass & Complete  N/A  In Process  Pass & Ongoing  Pass & Ongoing	- 1		Produce a compensation and benefit				
5. Develop training strategy 12/31/2016 N/A Completed Pass & Complete  Major Risks to Implementation & Risk N/A N/A In Process Pass & Ongoing	5. Develop training strategy  12/31/2016  N/A  Completed  Pass & Complete  Major Risks to Implementation & Risk Mitigation Strategies  N/A  N/A  N/A  In Process  Pass & Ongoing  N/A  N/A  In Process  Pass & Ongoing	١,		analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	N/A	Completed	Pass & Complete
Major Risks to Implementation & Risk Mitigation Strategies  N/A  N/A  N/A  In Process  Pass & Ongoing	Major Risks to Implementation & Risk Mitigation Strategies  Major Dependencies on Organizational N/A N/A N/A N/A In Process Pass & Ongoing							
Mitigation Strategies N/A N/A In Process Pass & Ongoing	Mitigation Strategies  N/A  N/A  In Process  Pass & Ongoing  Major Dependencies on Organizational  N/A  N/A  In Process  Pass & Ongoing			5. Develop training strategy	12/31/2016	N/A	Completed	Pass & Complete
Mitigation Strategies  N/A  N/A  In Process  Pass & Ongoing	Mitigation Strategies  N/A  N/A  In Process  Pass & Ongoing  Major Dependencies on Organizational  N/A  N/A  In Process  Pass & Ongoing			Major Picks to Implementation & Pick				
Major Dependencies on Organizational	N/A N/A IN PROCESS PASS & UNPOIND				N/A	N/A	In Process	Pass & Ongoing
	N/A N/A IN PROCESS PASS & UNPOIND	-		Major Dependencies on Organizational	I			



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

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



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			

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



	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	N/A	Completed	Pass & Complete	
		6. Finalize partnership agreements or contracts with CBOs	9/30/2016	N/A	Completed	Pass & Complete	
Additional							
Governance Milestones (non AV-	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g., local departments of health and	3/31/2016	N/A	Completed	Pass & Complete	N/A
driving)		tels, local desartificities of ficultificities					
		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	



	Print			The New Y	ork and Presbyt	erian Hospital - Domain 1 Orga	inizational AVs
Additional Governance							N/A
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	14/1
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

		Sec	ction 03 - Financia	al Sustainability			
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving		Date	Date	Status		711711111111111111111111111111111111111
		1. Finalize PPS finance structure, including	12/31/2015	N/A	Completed	Pass & Complete	
		reporting structure					
		2. Perform network financial health					
		current state assessment and develop	3/31/2016	N/A	Completed	Pass & Complete	
		financial sustainability strategy to address	3/31/2010	IV/A	Completed	r ass & complete	
		key issues.					
e							
Financial							
Stability		3. Finalize Compliance Plan consistent					1
Update		with New York State Social Services Law	12/31/2015	N/A	Completed	Pass & Complete	
		363-d					



	4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Additional Financial					
tability opic Areas	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			



Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Finalize cultural competency / health literacy strategy.	12/31/2015	N/A	Completed	Pass & Complete	
Cultural							
Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	N/A	Completed	Pass & Complete	1
		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	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Cultural Competency							N1/A
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Topic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



	Print						
_							
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
							1
			Total				۱

		Sect	ion 05 - IT Systen	ns and Processes	S		
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).	3/31/2016	N/A	Complete	Pass & Complete	
	•	Develop an IT Change Management     Strategy.	N/A	N/A	In Process	Pass & Ongoing	
IT Systems and Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	N/A	In Process	Pass & Ongoing	N/A
	•	Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		Develop a data security and	N/A	N/A	In Process	Pass & Ongoing	
		confidentiality plan.	11//	14/74	1111100033	1 ass a 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	N/A			
Additional IT Systems and		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing				
Processes Topic Areas							N/A			
		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	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded		
Measure	Driving	ivillestorie	Date	Date	Status	neviewei Status	Av Awarded		
		1. Establish reporting structure for PPS-							
		wide performance reporting and	3/31/2016	N/A	Completed	Pass & Coomplete			
		communication.					N/A		
Derformanc									



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



Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication	N/A	N/A	In Process	Pass & Ongoing	
		and engagement plan.	<u> </u>	,			
Practitioner Engagement	•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	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	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Practitioner Engagement Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



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N/A	Progress Reporting	
N/A	N/A N/A	Progress Reporting N/A N/A
	N/A	Progress Reporting N/A

Section 08 - Population Health Management								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Award	
		Develop population health management roadmap.	N/A	N/A	In Process	Pass & Ongoing	N/A	
Population Health							IN/A	
		2. Finalize PPS-wide bed reduction plan.	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		
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
Population			ı				N/A	
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing		



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

		9	Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Perform a clinical integration 'needs assessment'.	3/31/2017	N/A	Completed	Pass & Complete	N/A
Clinical							IN/A
Integration		2. Develop a Clinical Integration strategy.	3/31/2017	N/A	In Process	Pass & Complete	N/A
							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							NI/A



## Save & Return Print

Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IV/A		
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing			
	Total								



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

The New York and Presbyterian Hospital AV Adjustments

AV Adjustment Scoresheet								
Adjustment	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	AVs Awarded
		Projects	Available	Net	Percentage	· •	Net	Percentage AV
	Project	Selected	Available	Awarded	AV	AVs	Awarded	reiteillage 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	145.00	93.33	64%	0.00	93.33	64%
Total			195.00	143.33	74%	0.00	143.33	74%

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



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 899,610
DY4, Q4 Payment Earned	\$ 251,891

			2.a.i Scores	heet							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	179,922	179,922		
	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	5.00	5.00	100%	8%	8%	71,969	71,969		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	0.00	0%	72%	72%	647,719	-		
	Domain 2 Subtotal			5.00	33%	80%	80%	719,688	71,969		
Total Complete			20.00	10.00	50%	100%	100%	899,610	251,891		

Total Project 2.a.i AVs Awarded: 10 out of 20

#### **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 Revie	wer Commen	t							
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00				



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

#### Enter Reviewer Comment

Total

0.00

	Domain 1 Project Prescribed N	lilestones P	roject 2.a.i				
AV Driving		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 Revie	wer Commen	nt				
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	nt				
	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	



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 Revie	wer Commen	t					
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 Revie	wer Commen	t					
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		
	wer Commen	t					
Total							



AV Driving	Measure	Reviewer Status	AVs Awarded
	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		
	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		
	Total		5.00

	Domain 2 Pay for Performance					
<b>AV Driving</b>	Measure	Reviewer Status	Avardad			
	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	Fail	0			
	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	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 25 months to 6 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Fail	0
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Fail	0
Enter Reviewer Comment	1 4.11	U
Primary Care - Usual Source of Care - Q2	Fail	0
Enter Reviewer Comment	i aii	U
Total		0.00
Total		0.00



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (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, Q4 Payment Available	\$ 631,015
DY4, Q4 Payment Earned	\$ 176,684

	2.b.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20% 20%	126,203	126,203
Domain 1	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	5.00	5.00	100%	8%	8%	50,481	50,481
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	0.00	0%	72%	72%	454,331	-
	Domain 2 Subtotal			5.00	33%	80%	80%	504,812	50,481
	Total Complete		21.00	11.00	52%	100%	100%	631,015	176,684

Total Project 2.b.i AVs Awarded: 11 out of 21

#### **Hide Reviewer Comments**

	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							



	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 N	1ilestones - P	roject 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 Revie	wer Commen	t			
	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					



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	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
		wer Commen	rt			
	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 Revie	wer Commer	t			
	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 Revie	wer Commen	rt			
	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 Revie	wer Commen	rt			
	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 Revie	wer Commer	t			
	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				AVS
<b>AV Driving</b>	Measure				Reviewer Status	Avardad



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		
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able	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	Pass & Ongoing	1
Enter Reviewer Comment		
Total		5.00

	Domain 2 Pay for Performance		
<b>AV Driving</b>	Measure	Reviewer Status	Avs
	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	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	Enter Reviewer Comment		



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	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0	
	Enter Reviewer Comment			
	H-CAHPS – Care Transition Metrics	Fail	0	
	Enter Reviewer Comment			
	Potentially Avoidable Emergency Room Visits	Fail	0	
	Enter Reviewer Comment			
	Potentially Avoidable Readmissions	Fail	0	
	Enter Reviewer Comment			
	PDI 90– Composite of all measures +/-	Fail	0	
	Enter Reviewer Comment			
	PQI 90 – Composite of all measures +/-	Fail	0	
	Enter Reviewer Comment			
	Primary Care - Length of Relationship - Q3	Fail	0	
	Enter Reviewer Comment			
	Primary Care - Usual Source of Care - Q2	Fail	0	
	Enter Reviewer Comment			
Total				



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iii

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 694,651
DY4, Q4 Payment Earned	\$ 171,347

	2.b.iii Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	138,930	115,775		
	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	5.00	5.00	100%	8%	8%	55,572	55,572		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	0.00	0%	72%	72%	500,149	-		
	Domain 2 Subtotal			5.00	33%	80%	80%	555,721	55,572		
	Total	Complete	21.00	10.00	48%	100%	100%	694,651	171,347		

Total Project 2.b.iii AVs Awarded: 10 out of 21

#### **Hide Reviewer Comments**

	Domain 1 Project Milestones Project 2.b.iii								
AV Driving	Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs			
			Due Date	Status		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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•	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					

	Domain 1 Project Prescribed M	ilestones - Pr	oject 2.b.iii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	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							



Print		The I	New York and	l Presbyterian Hospital - P	roject 2.b.iii	
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	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						
<b>AV Driving</b>	Measure	Reviewer Status	AVS				
	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						
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able	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  Pass & Ongo				
	Enter Reviewer Comment			
Total				

	Domain 2 Pay for Performance		
AV Driving	Measure	Reviewer Status	AVS
	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	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Fail	0



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	Enter Reviewer Comment			
	PDI 90– Composite of all measures +/-	Fail	0	
	Enter Reviewer Comment			
	PQI 90 – Composite of all measures +/-	Fail	0	
	Enter Reviewer Comment			
	Primary Care - Length of Relationship - Q3	Fail	0	
	Enter Reviewer Comment			
	Primary Care - Usual Source of Care - Q2	Fail	0	
	Enter Reviewer Comment			
Total				



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iv

Project Snapshot					
<b>Project Domain</b>	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, Q4 Payment Available	\$ 644,554
DY4, Q4 Payment Earned	\$ 180,475

	2.b.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	128,911	128,911
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal			6.00	100%	20%	20%	128,911	128,911
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	51,564	51,564
	Domain 2 Pay for Performance (P4P)	Complete	10.00	0.00	0%	72%	72%	464,079	-
	Domain 2 Subtotal			5.00	33%	80%	80%	515,643	51,564
Total Complete		21.00	11.00	52%	100%	100%	644,554	180,475	

Total Project 2.b.iv AVs Awarded: 11 out of 21

#### **Hide Reviewer Comments**

	Domain 1 Project Milestones Project 2.b.iv							
AV Driving	Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs		
			Due Date	Status	neviewer status	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		
	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							



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							

Domain 2 Pay for Reporting							
<b>AV Driving</b>	Measure	Reviewer Status	Avardad				
	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						
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able	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	Pass & Ongoing	1				
	Enter Reviewer Comment						
	Total						

Domain 2 Pay for Performance						
<b>AV Driving</b>	Measure	Reviewer Status	Avs			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0			



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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	Fail	0
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	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 25 months to 6 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Fail	0
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Fail	0
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Fail	0



Save & Return

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	Total	0.00
	Enter Reviewer Comment	





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (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, Q4 Payment Available	\$ 562,760
DY4, Q4 Payment Earned	\$ 303,265

	3.a.i Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	112,552			
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				93,793		
	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	10.00	10.00	100%	10%	10%	56,276	56,276		
Domain 3	Domain 3 Pay for Performance	Complete	9.00	3.50	39%	70%	70%	393,932	153,196		
	Domain 3 Subtotal			13.50	71%	80%	80%	450,208	209,472		
Total Complete			25.00	18.50	74%	100%	100%	562,760	303,265		

Total Project 3.a.i AVs Awarded: 18.5 out of 25

	Domain 1 Project Milestones Project 3.a.i								
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed	Milestone	Reviewer Status	AVs			
		Due Date	Due Date	Status	Neviewei Status	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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	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								

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3								
		☐ 3.a.i Model 1 ☑ 3.a.i l	Model 2	3.a.i Model 3	3			
Model	Model AV Project Requirement and Metric		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Fail	N/A	
		Ent	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						
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A	
		En	ter Reviewer	Comment				
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		En	ter Reviewer	Comment				



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

Total 0

	Domain 3 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5



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Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00

	Domain 3 Pay for Performance		
<b>AV Driving</b>	Measure	Reviewer Status	Avs
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0



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Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Fail	0
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		3.50





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 558,551
DY4, Q4 Payment Earned	\$ 300,997

	3.a.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	111,710	93,092	
	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	10.00	10.00	100%	10%	10%	55,855	55,855	
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	9.00	3.50	39%	70%	70%	390,986	152,050	
	Domain 2 Subtotal			13.50	71%	80%	80%	446,841	207,905	
	Total	Complete	25.00	18.50	74%	100%	100%	558,551	300,997	

Total Project 3.a.ii AVs Awarded: 18.5 out of 25

	Domain 1 Project Milestones Project 3.a.ii							
AV Driving	Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs		
			Due Date	Status		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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	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 Revie	wer Commer	nt					
	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 Revie	wer Commer	nt					
	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							
	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							
	<ol> <li>Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.</li> </ol>	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

		wer Commer	it				
	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 Revie	wer Commer	nt				
	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 Revie	wer Commer	nt				
•	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 Revie	wer Commer	nt				
	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 Revie	wer Commer	nt				
	Total					0.00	

#### **Domain 3 Pay for Reporting**



AV Driving	Measure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5



Total		10.00
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5

	Domain 3 Pay for Performance		
<b>AV Driving</b>	Measure	Reviewer Status	Avardad
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5



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Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
Fallow up says for Children Dressriped ADUD Medications Continuation Dhase	Fail	0
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	ган	0
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		3.50



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 490,790
DY4, Q4 Payment Earned	\$ 294,474

	3.e.i Scoresheet									
Domain	AVS Net AVS Percentage		Funding %	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20% 20%	98,158	81,798	
	Patient Engagement Speed	Complete	1.00	0.00	0%					
	Domain 1 Subtotal	-	6.00	5.00	83%	20%	20%	98,158	81,798	
Damain 2	Domain 3 Pay for Reporting (P4R)	Camandata	7.00	7.00	100%	10%	10%	49,079	49,079	
Domain 3	Domain 3 Pay for Performance	Complete	7.00	3.33	48%	70%	70%	343,553	163,597	
	Domain 3 Subtotal				148%	80%	80%	392,632	212,676	
	Total	Complete	13.00	15.33	118%	100%	100%	490,790	294,474	

Total Project 3.e.i AVs Awarded: 15.333333333333 out of 13

	Domain 1 Project Milestones Project 3.e.i								
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed Due Date	Milestone	Reviewer Status	AVs			
		Due Date	Due Date	Status		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	Fail	0		
Enter Reviewer Comment							
Total							

		Domain 1 Project Prescribed Milestones	- Project 3.e	.i Models 1,	2 and 3		
		3.e.i Model 1	✓ 3.e.i M	lodel 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
		En	ter Reviewer	Comment			



		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		
		Ent	ter Reviewer	Comment					
3.e.i Model 2		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		
		Ent	ter 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		
		Ent	ter Reviewer	Comment					



	PIIIIL						
		17. Seek designation as center of excellence from New York	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
		State Department of Health.	9/30/2017	9/30/2017	Completed	rass & complete	IN/A
		Enter Reviewer Comment					
		LIII	ter neviewer	Comment			
Total						0	

	Domain 3 Pay for Reporting								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	HIV/AIDS Comprehensive Care : Engaged in Care	Pass & Ongoing	1						
	HIV/AIDS Comprehensive Care: Syphilis Screening	Pass & Ongoing	1						
	HIV/AIDS Comprehensive Care: Viral Load Monitoring	Pass & Ongoing	1						
	Cervical Cancer Screening	Pass & Ongoing	1						
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333						
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333						



Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Viral Load Suppression	Pass & Ongoing	1
Chlamydia Screening (16 – 24 Years)	Pass & Ongoing	1
Total		7

	Domain 3 Pay for Performance					
<b>AV Driving</b>	Measure	Reviewer Status	Avardad			
	HIV/AIDS Comprehensive Care : Engaged in Care	Pass & Ongoing	1			
	LINV/AIDS C					
	HIV/AIDS Comprehensive Care : Syphilis Screening	Pass & Ongoing	1			
	HIV/AIDS Comprehensive Care : Viral Load Monitoring	Pass & Ongoing	1			
	Cervical Cancer Screening	Fail	0			
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Fail	0			
	inedical Assistance with Smoking and Tobacco ose cessation - Advised to Quit	i ali	U			
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Fail	0			
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333			
	Viral Load Suppression	Fail	0			



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Chlamydia Screening (16 – 24 Years)	Fail	0
Total		3.3333333





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 590,035
DY4, Q4 Payment Earned	\$ 590,035

	3.g.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	12%	69,416	69,416
Domain 1	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%	12%	69,416	69,416
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	88%	520,619	520,619
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	0.00	0.00	0%	70%	0%	-	-
Domain 2 Subtotal		5.00	5.00	100%	80%	88%	520,619	520,619	
	Total	Complete	11.00	11.00	100%	100%	100%	590,035	590,035

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

	Domain 1 Project Milestones Project 3.g.i						
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed	Milestone	Reviewer Status	AVs	
AV DITVING	, , , , , , , , , , , , , , , , , , , ,		Due Date	Status		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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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						

	Domain 1 Project Prescribed N	1ilestones - P	roject 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 Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of patients indicating need who were offered or provided an intervention for pain symptoms experienced during the past week	Pass & Ongoing	1				
	Percentage of patients indicating need who were offered or provided an intervention for physical symptoms (other than pain) experienced during the past week	Pass & Ongoing	1				
	Percentage of patients indicating need who were offered or provided an intervention for not feeling at peace						
	during the past week	Pass & Ongoing	1				
	Describes of actionts indication and who were efforced as any index on intermediate for degrees in facilities						
	Percentage of patients indicating need who were offered or provided an intervention for depressive feelings experienced during the past week	Pass & Ongoing	1				
	Percentage of ptients who were offered or provided an intervention when there was no advance directive in						
	place	Pass & Ongoing	1				
	Total		5.00				

	Domain 3 Pay for Reporting	
AV Driving	Measure	Reviewer Status



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Total					
	piace	I			
	Percentage of ptients who were offered or provided an intervention when there was no advance directive in place	N/A	N/A		
	Percentage of patients indicating need who were offered or provided an intervention for depressive feelings experienced during the past week	N/A	N/A		
	Percentage of patients indicating need who were offered or provided an intervention for not feeling at peace during the past week	N/A	N/A		
	Percentage of patients indicating need who were offered or provided an intervention for physical symptoms (other than pain) experienced during the past week	N/A	N/A		
	experienced during the past week	N/A	N/A		
	Percentage of patients indicating need who were offered or provided an intervention for pain symptoms				



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 398,793
DY4, Q4 Payment Earned	\$ 398,793

			4.b.i Scores	heet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	79,759	79,759
	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	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			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

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY2)							
AV Driving	AV Driving Measure Reviewer Status							
	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 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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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 DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.c.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 333,036
DY4, Q4 Payment Earned	\$ 333,036

			4.c.i Scores	heet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	66,607	66,607
	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	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			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

	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						



Print

	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		



### Save & Return

Print		
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