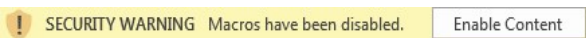





*Achievement Value (AV) Scorecard
Suffolk Care Collaborative*

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.	



[Print Summary](#)

[Print All](#)

*Achievement Value (AV) Scorecard
Suffolk Care Collaborative*

PPS Information

Quarter	DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
PPS	Suffolk Care Collaborative
PPS Number	16

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, Q4 Payment Available	DY4, Q4 Payment Earned
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00	<i>Organizational funds are embedded within each project's payment</i>	
2.a.i	20.00	13.50	0.00	13.50	\$ 3,029,548	\$ 1,611,719
2.b.iv	21.00	14.50	0.00	14.50	\$ 2,326,260	\$ 1,237,570
2.b.vii	21.00	14.50	0.00	14.50	\$ 2,218,062	\$ 1,180,009
2.b.ix	21.00	13.50	0.00	13.50	\$ 1,947,566	\$ 971,186
2.d.i	14.00	12.00	0.00	12.00	\$ 2,116,738	\$ 1,354,713
3.a.i	26.00	18.00	0.00	18.00	\$ 2,109,864	\$ 1,005,702
3.b.i	20.00	15.83	0.00	15.83	\$ 2,730,976	\$ 1,660,005
3.c.i	18.00	17.33	0.00	17.33	\$ 2,759,052	\$ 2,506,590
3.d.ii	14.00	13.00	0.00	13.00	\$ 1,677,071	\$ 1,383,584



Department of Health

Medicaid Redesign Team

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

Print Summary

Print All

*Achievement Value (AV) Scorecard
Suffolk Care Collaborative*

4.a.ii	16.00	16.00	0.00	16.00	\$ 1,081,981	\$ 1,081,981
4.b.ii	22.00	22.00	0.00	22.00	\$ 919,684	\$ 919,684
AV Adjustments (Column F)						
Total	213.00	170.17	0.00	170.17	\$ 22,916,802	\$ 14,912,743



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

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

Workforce Strategy						
Workforce Strategy Budget Updates	●					
	●	Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs)

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



Save & Return

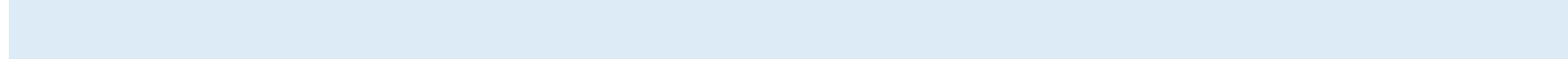
Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment
Suffolk Care Collaborative - Domain 1 Organizational AVs*

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



Section 01 - Budget



	●	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	
--	---	---	---------	-----	-----------	--



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

Quarterly Project Reports, Project Budget and Flow of	●	Module 1.2 - PPS Budget Report (Quarterly)	Ongoing	N/A	In Process		1
	●	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed		
	◐						
	●	Quarterly Progress Reports	N/A	N/A	In Process		

Section 02 - Governance

Governance Structure	●	1. Finalize governance structure and sub-committee structure	9/30/2015	N/A	Completed	
	●	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	9/30/2015	N/A	Completed	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

Updates							1
	●	3. Finalize bylaws and policies or Committee Guidelines where applicable	6/30/2015	N/A	Completed	Pass & Complete	
Governance Process Update	●	4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
	●	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	
Additional Governance Milestones (non AV-driving)	●	6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	In Process	Pass & Ongoing	
	●	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	9/30/2016	N/A	Completed	Pass & Complete	
	●	8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete	
							N/A



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment
Suffolk Care Collaborative - Domain 1 Organizational AVs*

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	
	●	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
	●	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	
	●	4. Develop a Value Based Needs Assessment "VNA"	3/31/2020	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	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs)

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

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

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

Section 05 - IT Systems and Processes



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

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).	6/30/2016	N/A	Complete	Pass & Complete	N/A	
	●	2. Develop an IT Change Management Strategy.	6/30/2016	N/A	Complete	Pass & Complete		
	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	3/31/2016	N/A	Complete	Pass & Complete		
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	9/30/2016	N/A	Complete	Pass & Complete		
	●	5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete		
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs)

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

Section 06 - Performance Reporting							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performance Reporting	●	1. Establish reporting structure for PPS-wide performance reporting and communication.	9/30/2016	N/A	Complete	Pass & Complete	N/A
	●	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	3/31/2016	N/A	Complete	Pass & Complete	N/A

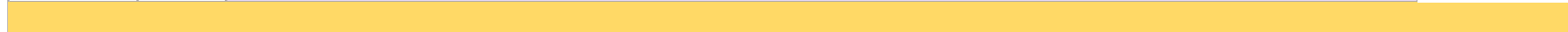


Save & Return

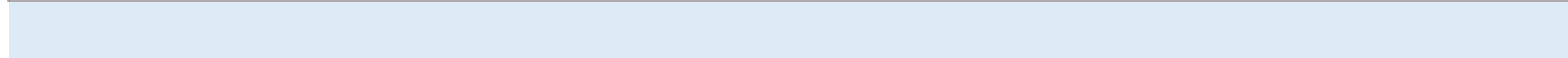
Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

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



Section 07 - Practitioner Engagement



	●	1. Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Complete	
--	---	---	-----------	-----	----------	--



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

Practitioner Engagement	●						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.	3/31/2016	N/A	Complete	Pass & Complete	
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	
	●						



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

--	--	--

Section 08 - Population Health Management

--	--	--	--	--	--	--	--

Population Health	●	1. Develop population health management roadmap.	6/30/2016	N/A	Complete		N/A
Population Health	●	2. Finalize PPS-wide bed reduction plan.	3/31/2017	N/A	Complete		N/A
Additional Population Health Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process		
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process		
Additional Population Health Topic Areas	●	Roles and Responsibilities	N/A	N/A	In Process		
Additional Population Health Topic Areas	●	Key Stakeholders	N/A	N/A	In Process		N/A

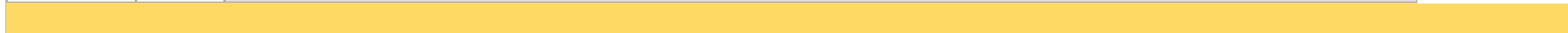


Save & Return

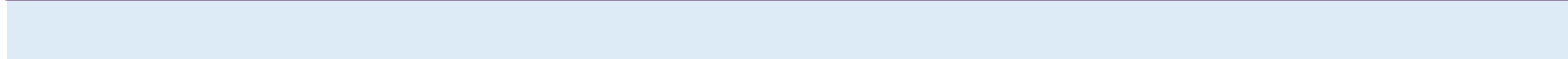
Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs)

	●	IT Expectations	N/A	N/A	In Process	
	●	Progress Reporting	N/A	N/A	In Process	



Section 09 - Clinical Integration



Clinical	●	1. Perform a clinical integration 'needs assessment'.	N/A	N/A	In Process		N/A
	◐		6/30/2016				N/A
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process		
		●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
	◐	Roles and Responsibilities	N/A	N/A	In Process		



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Suffolk Care Collaborative - Domain 1 Organizational AVs

Additional Clinical Integration Topic Areas	●						
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	14/15
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							0



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative AV Adjustments*

AV Adjustment Scoresheet								
Adjustment	AVs Per Project	Total Projects Selected	Total AVs Available	Total AVs Awarded		Adjusted AVs	Net AVs Awarded	
				Net Awarded	Percentage AV		Net Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	158.00	115.17	73%	0.00	115.17	73%
Total			213.00	170.17	80%	0.00	170.17	80%

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments	
●	<i>Please note that there are no AV adjustments for Suffolk Care Collaborative in DY2, Q1</i>



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.a.i

Project Snapshot	

Payment Snapshot	
DY4, Q4 Payment Available	\$ 3,029,548
DY4, Q4 Payment Earned	\$ 1,611,719

2.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	605,910	605,910
	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%	605,910	605,910
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	242,364	242,364
	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.50	35%	72%	72%	2,181,274	763,446
Domain 2 Subtotal			15.00	8.50	57%	80%	80%	2,423,638	1,005,810
Total			20.00	13.50	68%	100%	100%	3,029,548	1,611,719

Total Project 2.a.i AVs Awarded: 13.5 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
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.a.i

●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00
<i>Enter Reviewer Comment</i>						
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	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter) Suffolk Care Collaborative - Project 2.a.i

	<i>Enter Reviewer Comment</i>					
●	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A
	<i>Enter Reviewer Comment</i>					
●	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.a.i

●	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
---	--	-----------	-----------	-----------	-----------------	-----

Domain 2 Pay for Reporting

AV Driving	Measure	Reviewer Status	AVs Awarded
●	Medicaid Spending on ER and Inpatient Services ±		1
●			1
●	<i>Enter Reviewer Comment</i>		
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange		1
●			1
●			1



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.a.i*

Domain 2 Pay for Performance		
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0
		0
		0
		0
		0
		0
		0
		0
		0
		0
		1
		0
		0
		1
		1
		0



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.a.i

●	Primary Care - Length of Relationship - Q3		0.5
<i>Enter Reviewer Comment</i>			
◐		Fail	0
<i>Enter Reviewer Comment</i>			
Total			3.50



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - 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, Q4 Payment Available	\$ 2,326,260
DY4, Q4 Payment Earned	\$ 1,237,570

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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	465,252	465,252
	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%	465,252	465,252
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	186,101	186,101
	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.50	35%	72%	72%	1,674,907	586,217
Domain 2 Subtotal			15.00	8.50	57%	80%	80%	1,861,008	772,318
Total		Complete	21.00	14.50	69%	100%	100%	2,326,260	1,237,570

Total Project 2.b.iv AVs Awarded: 14.5 out of 21

Hide Reviewer Comments

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.iv

●	<i>Enter Reviewer Comment</i>		
		Pass & Complete	0.00
●	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
●	<i>Enter Reviewer Comment</i>		
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
	<i>Enter Reviewer Comment</i>					
●	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
					Pass & Complete	N/A
●	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.iv

●	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●						N/A
<i>Enter Reviewer Comment</i>						
●	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed		N/A
<i>Enter Reviewer Comment</i>						

Domain 2 Pay for Reporting			
AV Driving	Measure	Reviewer Status	AVs Awarded
			1
<i>Enter Reviewer Comment</i>			
●	Medicaid spending on Primary Care and community based behavioral health care		1
<i>Enter Reviewer Comment</i>			



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.iv

	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange		1
	<i>Enter Reviewer Comment</i>		
	<i>Enter Reviewer Comment</i>		

Domain 2 Pay for Performance			
AV Driving	Measure	Reviewer Status	AVS Awarded
	<i>Enter Reviewer Comment</i>		0
	<i>Enter Reviewer Comment</i>		0
	<i>Enter Reviewer Comment</i>		0
	<i>Enter Reviewer Comment</i>		0
	<i>Enter Reviewer Comment</i>		0
	<i>Enter Reviewer Comment</i>		0



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.iv

	Children's Access to Primary Care- 7 to 11 years	Fail	0
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	0.5
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
Total			3.50



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.ix

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.ix
Project Title	Implementation of observational programs in hospitals

Payment Snapshot

2.b.ix 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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	389,513	324,594
	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%	389,513	324,594
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	155,805	155,805
	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.50	35%	72%	72%	1,402,248	490,787

Total Project 2.b.ix AVs Awarded: 13.5 out of 21

Hide Reviewer Comments

Domain 1 Project Milestones Project 2.b.ix						
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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.ix

●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	0.00
●	<i>Enter Reviewer Comment</i>	Fail	0
●	<i>Enter Reviewer Comment</i>		
Total			0.00

Domain 1 Project Prescribed Milestones - Project 2.b.ix						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	2. Create clinical and financial model to support the need for the unit.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.ix

●	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 Direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	9/30/2017	9/30/2017	Completed		N/A
<i>Enter Reviewer Comment</i>						
●	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed		N/A
<i>Enter Reviewer Comment</i>						

Domain 2 Pay for Reporting			
AV Driving	Measure	Reviewer Status	AVs Awarded
◐			1
<i>Enter Reviewer Comment</i>			
◐			1
<i>Enter Reviewer Comment</i>			
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
<i>Enter Reviewer Comment</i>			



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.ix

	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
Total			5.00

Domain 2 Pay for Performance			
AV Driving	Measure	Reviewer Status	AVS Awarded
		Fail	
	Enter Reviewer Comment		
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Fail	
	Enter Reviewer Comment	Pass & Ongoing	
	Enter Reviewer Comment		



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.ix

	H-CAHPS – Care Transition Metrics	Fail	0
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	0.5
	<i>Enter Reviewer Comment</i>		
		Fail	0
	<i>Enter Reviewer Comment</i>		
Total			3.50



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.vii

Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.vii
Project Title	Implementing the INTERACT project (inpatient transfer avoidance program for SNF)

Payment Snapshot

2.b.vii 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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	443,612	443,612
	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%	443,612	443,612
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	177,445	177,445
	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.50	35%	72%	72%	1,597,004	558,952

Total Project 2.b.vii AVs Awarded: 14.5 out of 21

Hide Reviewer Comments

Domain 1 Project Milestones Project 2.b.vii						
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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.vii

●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	0.00
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
●	<i>Enter Reviewer Comment</i>		
Total			1.00

Domain 1 Project Prescribed Milestones - Project 2.b.vii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net .	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
					Pass & Complete	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.vii

	<i>Enter Reviewer Comment</i>						
●	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
●	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
●	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
●	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
●	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
●	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	<i>Enter Reviewer Comment</i>						
Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.vii						0.00	

Domain 2 Pay for Reporting



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.vii

AV Driving	Measure	Reviewer Status	AVs Awarded
			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		
●			1
	Enter Reviewer Comment		
●			1
	Enter Reviewer Comment		

Domain 2 Pay for Performance			
AV Driving	Measure	Reviewer Status	AVs Awarded
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0
	Enter Reviewer Comment		



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.b.vii

	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Pass & Ongoing	1
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Pass & Ongoing	1
	Enter Reviewer Comment	Pass & Ongoing	1
	Enter Reviewer Comment	Fail	0
	Enter Reviewer Comment	Pass & Ongoing	0.5
	Enter Reviewer Comment	Fail	0
Total			3.50



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,116,738
DY4, Q4 Payment Earned	\$ 1,354,713

2.d.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	423,348	423,348
	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%	423,348	423,348
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	8%	8%	169,339	169,339
	Domain 2 Pay for Performance (P4P)	Complete	4.00	2.00	50%	72%	72%	1,524,052	762,026
Domain 2 Subtotal			8.00	6.00	75%	80%	80%	1,693,391	931,365
Total		Complete	14.00	12.00	86%	100%	100%	2,116,738	1,354,713

Total Project 2.d.i AVs Awarded: 12 out of 14

Hide Reviewer Comments

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

●	<i>Enter Reviewer Comment</i>						
					Pass & Ongoing	0.00	
●	<i>Enter Reviewer Comment</i>						
					Pass & Ongoing	1	
●	<i>Enter Reviewer Comment</i>						
Total						1.00	

Domain 1 Project Prescribed Milestones - Project 2.d.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	9/30/2018	9/30/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	3. Identify UI, NU, and LU “hot spot” areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified “hot spot” areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

●	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
●	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
●	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
●	7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
●					Pass & Complete	N/A
Enter Reviewer Comment						
●	9. Measure PAM® components	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
●	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	9/30/2018	9/30/2018	Completed	Pass & Complete	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

	<i>Enter Reviewer Comment</i>					
●	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	9/30/2018	9/30/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services and	9/30/2018	9/30/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	9/30/2018	9/30/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.	9/30/2018	9/30/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

●	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed		N/A
---	---	-----------	-----------	-----------	--	-----

Domain 2 Pay for Reporting Project 2.d.i

●	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information		0.25
◐			0.25
◐			0.25
◐			0.25
◐			1



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 2.d.i

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

Domain 2 Pay for Performance Project 2.d.i			
AV Driving	Measure	Reviewer Status	AVS Awarded
		Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	
●	<i>Enter Reviewer Comment</i>	Fail	
●	<i>Enter Reviewer Comment</i>	Fail	
●	<i>Enter Reviewer Comment</i>		
Total			2.00



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - 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	\$ 2,109,864
DY4, Q4 Payment Earned	\$ 1,005,702

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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	421,973	351,644
	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%	421,973	351,644
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	210,986	210,986
	Domain 3 Pay for Performance		10.00	3.00	30%	70%	70%	1,476,904	443,071
Domain 3 Subtotal			20.00	13.00	65%	80%	80%	1,687,891	654,058
Total		Complete	26.00	18.00	69%	100%	100%	2,109,864	1,005,702

Total Project 3.a.i AVs Awarded: 18 out of 26

Hide Reviewer Comments

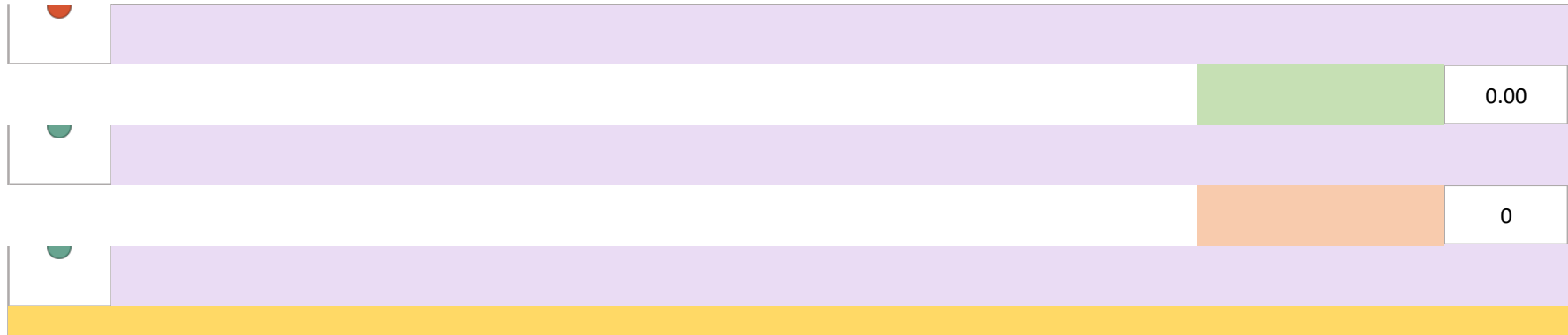
Domain 1 Project Milestones Project 3.a.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.a.i



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

3.a.i Model 1 3.a.i Model 2 3.a.i Model 3

Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
3.a.i Model 1		1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	Completed		N/A
		<i>Enter Reviewer Comment</i>					
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed		N/A



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.a.i

	●	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A		
		<i>Enter Reviewer Comment</i>						Pass & Complete	N/A
	◐	<i>Enter Reviewer Comment</i>						Pass & Complete	N/A
3.a.i Model 2	◐	<i>Enter Reviewer Comment</i>						Pass & Complete	N/A
	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	<i>Enter Reviewer Comment</i>								
	●	7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	◐	<i>Enter Reviewer Comment</i>						Pass & Complete	N/A
	◐	<i>Enter Reviewer Comment</i>						Pass & Complete	



Save & Return

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

Print

Suffolk Care Collaborative - Project 3.a.i

		<i>Enter Reviewer Comment</i>					
	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	Completed			N/A
							N/A
							N/A
							N/A
							N/A
							N/A
							N/A
							N/A
							N/A





Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.a.i*

AV Driving	Measure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
		Pass & Ongoing	0.5
		Pass & Ongoing	0.5
		Pass & Ongoing	1
		Pass & Ongoing	1
		Pass & Ongoing	1
		Pass & Ongoing	1
		Pass & Ongoing	0.5



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.a.i*

	Follow-up after hospitalization for Mental Illness - within 7 days		0.5
			0.5
			0.5
			0.5
			0.5
			0.5
			1
			1



Domain 3 Pay for Performance



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.a.i

AV Driving	Measure	Reviewer Status	AVS Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
		Pass & Ongoing	0.5
		Pass & Ongoing	0.5
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Fail	0
		Pass & Ongoing	1
Total			3.00



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,730,976
DY4, Q4 Payment Earned	\$ 1,660,005

3.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	12%	321,291	267,743
	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%	12%	321,291	267,743
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	10%	6%	160,646	160,646
	Domain 3 Pay for Performance (P4P)		7.00	3.83	55%	70%	82%	2,249,039	1,231,616
Domain 3 Subtotal			14.00	10.83	77%	80%	88%	2,409,684	1,392,262
Total		Complete	20.00	15.83	79%	100%	100%	2,730,976	1,660,005

Total Project 3.b.i AVs Awarded: 15.83 out of 20

Hide Reviewer Comments

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i

●	<i>Enter Reviewer Comment</i>	Pass & Ongoing	0.00
●	<i>Enter Reviewer Comment</i>	Fail	0
●	<i>Enter Reviewer Comment</i>		
Total			0.00

Domain 1 Project Prescribed Milestones - Project 3.b.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter) Suffolk Care Collaborative - Project 3.b.i

●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						
●	10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
<i>Enter Reviewer Comment</i>						



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i

●	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	14. Develop and implement protocols for home blood pressure monitoring with follow up support.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
					Pass & Complete	



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i

●	<i>Enter Reviewer Comment</i>					
●	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	3/31/2018	3/31/2018	Completed		N/A
●						N/A
●						

Domain 3 Pay for Reporting

●	Controlling High Blood Pressure					1
●						1
●						0.3333333
●						0.3333333
●						



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i*

	Health Literacy - Explained What to do if Illness Got Worse	Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.5
		Pass & Ongoing	0.5
		Pass & Ongoing	1
		Pass & Ongoing	



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.b.i*

Total	7.00



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.c.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,759,052
DY4, Q4 Payment Earned	\$ 2,506,590

3.c.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	12%	324,594	324,594
	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%	324,594	324,594
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	6%	162,297	162,297
	Domain 3 Pay for Performance (P4P)		6.00	5.33	89%	70%	82%	2,272,161	2,019,698
Domain 3 Subtotal			12.00	11.33	94%	80%	88%	2,434,458	2,181,996
Total		Complete	18.00	17.33	96%	100%	100%	2,759,052	2,506,590

Total Project 3.c.i AVs Awarded: 17.33 out of 18

Hide Reviewer Comments

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.c.i

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

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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.c.i

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

Domain 3 Pay for Reporting				
AV Driving	Measure		Reviewer Status	AVs Awarded
●	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±			1
	<i>Enter Reviewer Comment</i>			
●	Comprehensive Diabetes screening – All Tests (HbA1c, dilated eye exam, nephropathy monitor)			1
	<i>Enter Reviewer Comment</i>			
●				1
	<i>Enter Reviewer Comment</i>			



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.c.i*

	Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	
		Pass & Ongoing	
		Pass & Ongoing	1
Total			6.00



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.d.ii

Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.d.ii
Project Title	Expansion of asthma home-based self-management program

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,677,071
DY4, Q4 Payment Earned	\$ 1,383,584

3.d.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	335,414	335,414
	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%	335,414	335,414
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	167,707	167,707
	Domain 3 Pay for Performance (P4P)		4.00	3.00	75%	70%	70%	1,173,950	880,462
Domain 3 Subtotal			8.00	7.00	88%	80%	80%	1,341,657	1,048,169
Total		Complete	14.00	13.00	93%	100%	100%	1,677,071	1,383,584

Total Project 3.d.ii AVs Awarded: 13 out of 14

Hide Reviewer Comments

Domain 1 Project Milestones Project 3.d.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



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.d.ii

●	<i>Enter Reviewer Comment</i>		
	Pass & Ongoing	0.00	
●	<i>Enter Reviewer Comment</i>		
	Pass & Ongoing	1	
●	<i>Enter Reviewer Comment</i>		
Total		1.00	

Domain 1 Project Prescribed Milestones - Project 3.d.ii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce exposure	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
					Pass & Complete	N/A
●	<i>Enter Reviewer Comment</i>					



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.d.ii

●	4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	5. Ensure coordinated care for asthma patients includes social services and support.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	<i>Enter Reviewer Comment</i>					
Total						0.00

Domain 3 Pay for Reporting			
AV Driving	Measure	Reviewer Status	AVs Awarded



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 3.d.ii*

	Asthma Medication Ratio (5 – 64 Years)		1
			0.5
			0.5
			1
			1
			1

Domain 3 Pay for Performance

	Asthma Medication Ratio (5 – 64 Years)		0
			0.5
			0.5
			1
			1
			1



Save & Return

Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 4.a.ii

Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.a.ii
Project Title	Prevent Substance Abuse and Other Mental, Emotional and Behavioral Disorders

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,081,981
DY4, Q4 Payment Earned	\$ 1,081,981

4.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	216,396	216,396
	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%	216,396	216,396
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	865,585	865,585
	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%	865,585	865,585
Total		Complete	16.00	16.00	100%	100%	100%	1,081,981	1,081,981

Total Project 4.a.ii AVs Awarded: 16 out of 16

Hide Reviewer Comments

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



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 4.a.ii

Save & Return

Print




	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1
■	<i>Enter Reviewer Comment</i>	Pass & Ongoing	1



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 4.a.ii

Save & Return

Print

		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
Total			11.00



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 4.b.ii*

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 919,684
DY4, Q4 Payment Earned	\$ 919,684

4.b.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	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	183,937	183,937
	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%	183,937	183,937
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	80%	80%	735,747	735,747
	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%	735,747	735,747
Total		Complete	22.00	22.00	100%	100%	100%	919,684	919,684

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

Hide Reviewer Comments

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



Save & Return

Print

*Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Suffolk Care Collaborative - Project 4.b.ii*

	<i>Enter Reviewer Comment</i>		
		Pass & Ongoing	1
	<i>Enter Reviewer Comment</i>		
Total			17.00