

Achievement Value (AV) Scorecard Montefiore Hudson Valley Collaborative

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
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	Project Link (click on the purple link below to access each belowfully project report) Domain I: Organizational [All Projecto] AV Adjustments (Column 1) 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1
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.	Hide Reviewer Comments



Print Summary

Print All

Achievement Value (AV) Scorecard Montefiore Hudson Valley Collaborative

PPS Information					
Quarter	DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)				
PPS	Montefiore Hudson Valley Collaborative				
PPS Number	19				

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Data		Payment Data					
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY5, Q2 Payment Available	DY5, Q2 Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizational funds are embedded within each project's payment					
2.a.i	20.00	11.00	0.00	11.00	\$ 1,318,592	\$ 214,930				
2.a.iii	20.00	11.00	0.00	11.00	\$ 1,125,812	\$ 183,507				
2.a.iv	20.00	11.00	0.00	11.00	\$ 1,319,769	\$ 215,122				
2.b.iii	20.00	11.00	0.00	11.00	\$ 954,708	\$ 155,617				
3.a.i	25.00	21.00	0.00	21.00	\$ 925,351	\$ 592,225				
3.a.ii	25.00	21.00	0.00	21.00	\$ 890,208	\$ 569,733				
3.b.i	19.00	14.33	0.00	14.33	\$ 665,581	\$ 266,232				
3.d.iii	13.00	11.00	0.00	11.00	\$ 713,191	\$ 392,255				
4.b.i	22.00	22.00	0.00	22.00	\$ 565,568	\$ 565,568				



Print Summary								(AV) Scorecard
Print All				М	ontej	fiore Hudson V	'alle	y Collaborative
4.b.ii	22.00	22.00	0.00	22.00	\$	421,314	\$	421,314
AV Adjustments (Column F)								
Total	206.00	155.33	0.00	155.33	\$	8,900,093	\$	3,576,504



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Montefiore Hudson Valley 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				
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 Awarde		
	•								
Workforce Strategy Budget Updates		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete			



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	•	Define target workforce state (in line with DSRIP program's goals)	3/31/2016	N/A	Completed	Pass & Complete
Additional Workforce Strategy	•	Create a workforce transition roadmap for achieving defined target workforce	6/30/2016	N/A	Completed	Pass & Complete
	•	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	6/30/2016	N/A	Completed	Pass & Complete
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	6/30/2016	N/A	Completed	Pass & Complete
		5. Develop training strategy	6/30/2016	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



	Prin						
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
			I	ı			
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
ditional orkforce							N/A
rategy 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	
				1			
			Total				1

	Section 01 - Budget									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete				



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		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
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 - Governance						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize governance structure and sub- committee structure	9/30/2015	N/A	Completed	Pass & Complete	
		2. Establish a clinical governance					
Governance		structure, including clinical quality	12/31/2015	N/A	Completed	Pass & Complete	
Structure		committees for each DSRIP project					



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Updates							
		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	N/A	N/A	Completed	Pass & Complete	
Additional -							
Governance Milestones (non AV- driving)		7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	N/A	Completed	Pass & Complete	
urivilig)							
		8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete	



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		9. Inclusion of CBOs in PPS	N/A	N/A	Completed	Pass & Complete			
		Implementation							
		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	N/A		
Additional									
Governance - Topic 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								



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		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	
Financial							
Stability Update		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	1
		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	



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		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial							NI / A
Stability 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 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		



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Additional Cultural	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Competency /Health Literacy 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			1

	Section 05 - IT Systems and Processes								
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded		
Measure	Driving	ivillestone	Date	Date	Status	Reviewer Status	AV Awarded		



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	•	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	
		Develop an IT Change Management Strategy.	12/31/2016	N/A	Complete	Pass & Complete	
T Systems		Develop roadmap to achieving clinical					
and Processes		data sharing and interoperable systems across PPS network	3/31/2017	N/A	Complete	Pass & Complete	N/.
		Develop a specific plan for engaging	12/31/2016	N/A	Complete	Pass & Complete	
		attributed members in Qualifying Entities	12,01,2010		Complete	, 333 & 331, \$133	
		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	



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Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							19/4
Topic Areas		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		Date	Date	Status			
		Establish reporting structure for PPS-wide performance reporting and communication.	9/30/2016	N/A	Completed	Pass & Complete	N/A	
Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	12/31/2016	N/A	Completed	Pass & Complete	N/A	



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	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	<u> </u>					
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional erformanc						N/A
Reporting 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				0

	Section 07 - Practitioner Engagement									
Process	AV		Required Due	Committed Due	Milestone	Reviewer Status	AN/ Asserted			
Measure	Driving	Milestone	Date	Date	Status	Reviewer Status	AV Awarded			
		1. Develop Practitioners communication and engagement plan.	6/30/2016	N/A	Completed	Pass & Complete				



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		Develop training / education plan					
Practitioner Engagement	•	targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	12/31/2016	N/A	Completed	Pass & Complete	N/A
_		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner							NI/A
Engagement opic 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	



Save & Return

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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Montefiore Hudson Valley Collaborative - Domain 1 Organizational AVs

Total 0

		Section	08 - Population I	Health Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Develop population health management roadmap.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Population							14,71
Health		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	
A 1 100		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Population							N/A
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	ĺ



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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							0

			Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform a clinical integration 'needs assessment'.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Clinical							NYA
Integration		2. Develop a Clinical Integration strategy.	3/31/2017	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	



Save & Return

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



Save & Return

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AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AV	Awarded	Adiusted	Net A	AVs Awarded	
Adjustment	Project	Projects	Available	Net	Percentage		Net	Dorcontago AV	
	Project	Selected	Available	Awarded	AV	AVS	Awarded	Percentage AV	
Organizational Adjustments (applied to all projects)	5.00	10.00	50.00	50.00	100%	0.00	50.00	100%	
Project Adjustments (applied to one project only)	Various	10.00	156.00	105.33	68%	0.00	105.33	68%	
Total			206.00	155.33	75%	0.00	155.33	75%	

Hid	e Reviewer Comments	Organizational	Project Adjustments					
	No AV Adjustments							
	Please note that there are no AV adjustments for Montefiore Hudson Valley Collaborative in DY2, Q1							



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 2.a.i

	Project Snapshot							
Project Domain	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	
DY5, Q2 Payment Available	\$ 1,318,592
DY5, Q2 Payment Earned	\$ 214,930

	2.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%	0%	-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	92,301	92,301
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	1.00	10%	93%	93%	1,226,290	122,629
	Domain 2 Subtotal			6.00	40%	100%	100%	1,318,592	214,930
	Total Complete			11.00	55%	100%	100%	1,318,592	214,930

Total Project 2.a.i AVs Awarded: 11 out of 20

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.i								
AV Driving	Project Requirement and Metric/Deliverable		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 Commer	nt						



Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Montefiore Hudson Valley Collaborative - Project 2.a.i

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Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A	
Enter Revie	Enter Reviewer Comment					
Total						

	Domain 1 Project Prescribed M	lilestones - P	roject 2.a.i						
AV Driving			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			
	Enter Reviewer Comment								
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	N/A			



Print

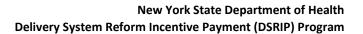
	Enter Reviewer Comment								
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	N/A			
	Enter Revie	wer Commer	nt						
	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A			
	Enter Reviewer Comment								
	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A			
	Enter Revie	wer Commer	pt						
	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								



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

Domain 2 Pay for Reporting						
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			





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	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)	Pass & Ongoing	1
	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		



Save & Return	
Print	

Primary Care - Length of Relationship - Q3	Primary Care - Length of Relationship - Q3	Fail	0
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Fail	0
	Enter Reviewer Comment		
	Total		1.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 2.a.iii

	Project Snapshot						
Project Domain	System Transformation Projects (Domain 2)						
Project ID	2.a.iii						
	Health Home At-Risk Intervention Program:						
Project Title	Proactive management of higher risk patients not						
	currently eligible for Health Homes through access						

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,125,812
DY5, Q2 Payment Earned	\$ 183,507

	2.a.iii Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%					
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-			
	Patient Engagement Speed	N/A	N/A	N/A	0%							
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	78,807	78,807			
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	1.00	10%	93%	93%	1,047,005	104,701			
Domain 2 Subtotal		15.00	6.00	40%	100%	100%	1,125,812	183,507				
	Total Complete		20.00	11.00	55%	100%	100%	1,125,812	183,507			

Total Project 2.a.iii AVs Awarded: 11 out of 20

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.iii							
AV Driving	ing Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	Completed	Pass & Ongoing	N/A	



Print		Mon	tefiore Hudso	n Valley Collaborative - P	roject 2.a.iii		
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Revie	Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Reviewer Comment							
Total					0.00		

	Domain 1 Project Prescribed Milestones - Project 2.a.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Reviewer Comment							
•	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



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	Enter Reviewer Comment							
	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Reviewer Comment							
	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commen	nt					
	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Fail	N/A		
	Enter Reviewer Comment							
	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Fail	N/A		
Enter Reviewer Comment								
	9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	3/31/2017	3/31/2017	Completed	Fail	N/A		



Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 2.a.iii

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Enter Reviewer Comment

Total 0.00

Domain 2 Pay for Reporting							
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		
AV Driving	Measure	Reviewer Status	



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Adult Access to Preventive or Ambula	atory Care - 20 to 44 years	Fail	(
	Enter Reviewer Comment		
Adult Access to Preventive or Ambula	atory Care - 45 to 64 years	Fail	
	Enter Reviewer Comment		
Adult Access to Preventive or Ambula	atory Care - 65 and older	Fail	
	Enter Reviewer Comment		
CAHPS Measures - Care Coordination	with provider up-to-date about care received from other providers	Fail	
	Enter Reviewer Comment		
Children's Access to Primary Care- 12	to 24 months	Fail	
	Enter Reviewer Comment		
Children's Access to Primary Care- 25	months to 6 years	Fail	
	Enter Reviewer Comment		
Children's Access to Primary Care- 7	o 11 years	Fail	
	Enter Reviewer Comment		
Children's Access to Primary Care- 12	to 19 years	Fail	
	Enter Reviewer Comment		
Getting Timely Appointments, Care a	nd information (Q6, 8, 10, and 12)	Pass & Ongoing	
	Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics		Fail	
	Enter Reviewer Comment		
Potentially Avoidable Emergency Roo	m Visits	Fail	
	Enter Reviewer Comment		
Potentially Avoidable Readmissions		Fail	
	Enter Reviewer Comment		
PDI 90- Composite of all measures +	/-	Fail	
	Enter Reviewer Comment		
PQI 90 – Composite of all measures +	/-	Fail	
	Enter Reviewer Comment		
Primary Care - Length of Relationship	- Q3	Fail	
	Enter Reviewer Comment		



Save & Return

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Primary Care - Usual Source of Care - Q2	Fail	0
Enter Reviewer Comment		
Total		1.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 2.a.iv

	Project Snapshot						
Project Domain	Project Domain System Transformation Projects (Domain 2)						
Project ID 2.a.iv							
Project Title	Create a medical village using existing hospital infrastructure						

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,319,769
DY5, Q2 Payment Earned	\$ 215,122

	2.a.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		0%		
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%		-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	92,384	92,384
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	1.00	10%	93%	93%	1,227,385	122,739
	Domain 2 Subtotal		15.00	6.00	40%	100%	100%	1,319,769	215,122
	Total	Complete	20.00	11.00	55%	100%	100%	1,319,769	215,122

Total Project 2.a.iv AVs Awarded: 11 out of 20

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.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		



Print Montefiore Hudson Valley Collaborative - Project 2.a.iv								
Enter Revie	ewer Commen	t						
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Revie	ewer Commen	t						
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Reviewer Comment								
Total					0.00			

	Domain 1 Project Prescribed Milestones - Project 2.a.iv					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Convert outdated or unneeded hospital capacity into an outpatient		_ ,_ , _ ,		5.11	
	services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.	9/30/2018	9/30/2018	In Process	Fail	0.00
	Enter Reviewer Comment					
	2. Provide a detailed timeline documenting the specifics of bed reduction					
•	and rationale. Specified bed reduction proposed in the project must include active or "staffed" beds.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
•	3. Ensure that all participating PCPs meet NCQA 2014 Level 3 PCMH					
	accreditation and/or meet state-determined criteria for Advanced	3/31/2018	3/31/2018	Completed	Fail	0.00
	Primary Care Models by the end of DSRIP Year 3.					
	Enter Reviewer Comment					



•	4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.			In Process	Pass & Ongoing	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					
	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total				0.00		

Domain 2 Pay for Reporting				
AV Driving	Measure	Reviewer Status AVs Awarde		
	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	



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	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				
AV Driving	Measure	Reviewer Status	AVS Awardad	
	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			



Save & Return

Print Montefiore Hudson	on Valley Collaborative - P	roject 2.a.iv
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)	Pass & Ongoing	1
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		1.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 2.b.iii

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 954,708
DY5, Q2 Payment Earned	\$ 155,617

	2.b.iii Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%							
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-				
	Patient Engagement Speed	N/A	N/A	N/A	0%								
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-				
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	66,830	66,830				
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	1.00	10%	93%	93%	887,878	88,788				
	Domain 2 Subtotal			6.00	40%	100%	100%	954,708	155,617				
	Total	Complete	20.00	11.00	55%	100%	100%	954,708	155,617				

Total Project 2.b.iii AVs Awarded: 11 out of 20

Hide Reviewer Comments

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

Save & Return

Print		Mon	tefiore Hudso	on Valley Collaborative - P	Project 2.b.iii		
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Reviewer Comment							
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
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	
	Establish ED care triage program for at-risk populations	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
•	 Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. Develop process and procedures to establish connectivity between the emergency department and community primary care providers. 	9/30/2017	9/30/2017	Completed	Fail	N/A	
	Enter Reviewer Comment						



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3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	9/30/2017	9/30/2017	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		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Enter Reviewer Comment		



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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		
AV Driving	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		



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 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)	Pass & Ongoing	1
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		1.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley 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	
DY5, Q2 Payment Available	\$ 925,351
DY5, Q2 Payment Earned	\$ 592,225

	3.a.i Scoresheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)					
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%								
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-					
	Patient Engagement Speed	N/A	N/A	N/A	0%									
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-					
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	92,535	92,535					
Domain 5	Domain 3 Pay for Performance	Complete	10.00	6.00	60%	90%	90%	832,816	499,690					
	Domain 3 Subtotal			16.00	80%	100%	100%	925,351	592,225					
Total Complete			25.00	21.00	84%	100%	100%	925,351	592,225					

Total Project 3.a.i AVs Awarded: 21 out of 25

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 Montefiore Hudson Valley Collaborative - Project 3.a.i							
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Revie	Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Reviewer Comment							
Total					0		

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3						
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3						
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
		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	Fail	N/A
		Enter Reviewer Comment					
		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
3.a.i Model 1		Ent	Enter Reviewer Comment				



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		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
		En	ter Reviewer	Comment			
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		En	ter Reviewer	Comment			
	•	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Enter Reviewer Comment					
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
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	Pass & Complete	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			
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A



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		Ent	Enter Reviewer Comment				
	•	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Ent	ter Reviewer	Comment			
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Ent	ter Reviewer	Comment			
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Enter Reviewer Comment					
		13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Enter Reviewer Comment					
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
		Ent	Enter Reviewer Comment				
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		Ent	ter Reviewer	Comment			
		Total					0



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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
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
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	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



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AV Driving	Measure	Reviewer Status	AVS
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
	Diabetes Monitoring for Feople with Diabetes and Schizophreina	i ali	
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
		0.00	
	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
		D 00 :	
	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
	Engagement of Alcohor and Other Drag Dependence Treatment (initiation and 2 visits within 44 days)	1 uss & 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) ±	Fail	0
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	Total		6.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 3.a.ii

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 890,208
DY5, Q2 Payment Earned	\$ 569,733

	3.a.ii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		0% -		
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%		-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	89,021	89,021
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	10.00	6.00	60%	90%	90%	801,187	480,712
Domain 3 Subtotal			20.00	16.00	80%	100%	100%	890,208	569,733
	Total	Complete	25.00	21.00	84%	100%	100%	890,208	569,733

Total Project 3.a.ii AVs Awarded: 21 out of 25

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 3.a.ii						
AV Dr	iving	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



Print Montefiore Hudson Valley Collaborative - Project 3.a.ii					
Enter Reviewer Comment					
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A
Enter Revie	ewer Commer	nt			
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A
Enter Reviewer Comment					
Total 0.0					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	Enter Reviewer Comment							
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			



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	Enter Reviewer Comment							
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Fail	N/A		
	Enter Revie	wer Commen	nt					
	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	Fail	N/A		
	Enter Revie	wer Commen	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 Reviewer Comment							
•	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2017	3/31/2017	Completed	Fail	N/A		
	Enter Reviewer Comment							
	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		



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Enter Reviewer Comment					
11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment					
Total					0.00

	Domain 3 Pay for Reporting				
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		



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	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
	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
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	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
-			



Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 3.a.ii

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Total 10.00

	Domain 3 Pay for Performance		
AV Driving	Measure	Reviewer Status	Avardad
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
	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	Fail	0
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
	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
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	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) ±	Fail	0



Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment C Montefiore Hudson Valley Collaborative - Proje			
Print			.,
Screening for Clinical Depression and follow-up		Pass & Ongoing	1
	Total		6.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley 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	
DY5, Q2 Payment Available	\$ 665,581
DY5, Q2 Payment Earned	\$ 266,232

	3.b.i Scoresheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)					
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0% 0%							
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			0%	-	-				
	Patient Engagement Speed	N/A	N/A	N/A	0%									
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-					
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	10%	10%	66,558	66,558					
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	7.00	2.33	33%	90%	90%	599,023	199,674					
	Domain 3 Subtotal			9.33	67%	100%	100%	665,581	266,232					
Total Complete		19.00	14.33	75%	100%	100%	665,581	266,232						

Total Project 3.b.i AVs Awarded: 14.33 out of 19

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



Print Montefiore Hudson Valley Collaborative - Project 3.b.i								
Enter Reviewer Comment								
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Reviewer Comment								
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Reviewer Comment								
Total 0					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				
	Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A				
	Enter Reviewer Comment									
	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A				
	Enter Reviewer Comment									
	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	N/A				
	Enter Reviewer Comment									



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4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revie	ewer Commen	nt						
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			
Enter Revie	ewer Commer	nt						
6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revie	ewer Commer	nt						
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			
Enter Reviewer Comment								
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			
Enter Reviewer Comment								
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			
Enter Reviewer Comment								
10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
Enter Revie	ewer Commen	nt						



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11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revi	ewer Commer	nt						
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			
Enter Revi	ewer Commer	nt						
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			
Enter Revi	ewer Commer	nt						
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			
Enter Reviewer Comment								
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			
Enter Reviewer Comment								
16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	Completed	Fail	N/A			



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Enter Reviewer Comment							
19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	3/31/2017	Completed	Fail	N/A		
Enter Reviewer Comment							
Total					0.00		

	Domain 3 Pay for Performance and Pay for Reporting				
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Controlling High Blood Pressure	Pass & Ongoing	1		
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1		
	Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.3333333		
	Health Literacy - Describing How to Follow Instructions	Pass & Ongoing	0.3333333		



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Health Literacy - Explained What to do if Illness Got Worse	Pass & Ongoing	0.3333333
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
Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy	Pass & Ongoing	0.5
Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%	Pass & Ongoing	0.5
Prevention Quality Indicator # 8 (Heart Failure) ±	Pass & Ongoing	1
Prevention Quality Indicator # 7 (HTN) ±	Pass & Ongoing	1



Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 3.b.i

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Total 7.00

	Domain 3 Pay for Performance		
AV Driving	Measure	Reviewer Status	AVS
	Controlling High Blood Pressure	Pass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Fail	0
	Health Literacy - Instructions Easy to Understand	Fail	0
	Health Literacy - Describing How to Follow Instructions	Fail	0
	Health Literacy - Explained What to do if Illness Got Worse	Fail	0
	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	Fail	0
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Fail	0
	Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy	Pass & Ongoing	0.5
	Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%	Pass & Ongoing	0.5
	Prevention Quality Indicator # 8 (Heart Failure) ±	Fail	0
	Prevention Quality Indicator # 7 (HTN) ±	Fail	0



Save & Return

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 3.b.i

Print

Total 2.33



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 3.d.iii

	Project Snapshot					
Project Domain	Clinical Improvement Projects (Domain 3)					
Project ID	3.d.iii					
Project Title	Implementation of evidence-based medicine guidelines for asthma management					

Payment Snapshot	
DY5, Q2 Payment Available	\$ 713,191
DY5, Q2 Payment Earned	\$ 392,255

	3.d.iii Scoresheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)								
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%										
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-								
	Patient Engagement Speed	N/A	N/A	N/A	0%												
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-								
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	71,319	71,319								
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	4.00	2.00	50%	90%	90%	641,872	320,936								
Domain 3 Subtotal			8.00	6.00	75%	100%	100%	713,191	392,255								
	Total	Complete	13.00	11.00	85%	100%	100%	713,191	392,255								

Total Project 3.d.iii AVs Awarded: 11 out of 13

Hide Reviewer Comments

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



Print Montefiore Hudson Valley Collaborative - Project 3.d.iii								
Enter Reviewer Comment								
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A			
Enter Reviewer Comment								
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Reviewer Comment								
Total					0.00			

	Domain 1 Project Prescribed Milestones - Project 3.d.iii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
•	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								



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4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
Total								

Domain 3 Pay for Performance and Pay for Reporting								
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1					
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5					
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5					
	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1					
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1					
	Total		4.00					

	Domain 3 Pay for Performance							
AV Driving	Measure	Reviewer Status	Avs					
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1					
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5					



Save & Return

Print Montefiore Hudso	on Valley Collaborative - Pi	roject 3.d.iii
Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
Pediatric Quality Indicator # 14 Pediatric Asthma ±	Fail	0
Prevention Quality Indicator # 15 Younger Adult Asthma ±	Fail	0
Total		2.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 4.b.i

	Project Snapshot							
Project Domain 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						
DY5, Q2 Payment Available	\$	565,568				
DY5, Q2 Payment Earned	\$	565,568				

	4.b.i Scoresheet															
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)							
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%										
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-							
	Patient Engagement Speed	N/A	N/A	N/A	0%											
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-							
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	100%	100%	565,568	565,568							
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-							
Domain 4 Subtotal			17.00	17.00	100%	100%	100%	565,568	565,568							
	Total	Complete	22.00	22.00	100%	100%	100%	565,568	565,568							

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

Hide Reviewer Comments

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



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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		
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•	Percentage of adults who are obese	Pass & Ongoing	1
	Enter Reviewer Comment		
	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



F		Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)				
	Print Montefiore Huds	Montefiore Hudson Valley Collaborative - Project 4.b.i				
	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			



Print

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 4.b.ii

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

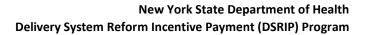
Payment Snapshot	
DY5, Q2 Payment Available	\$ 421,314
DY5, Q2 Payment Earned	\$ 421,314

4.b.ii Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%					
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-		
	Patient Engagement Speed	N/A	N/A	N/A	0%						
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-		
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	100%	100%	421,314	421,314		
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 4 Subtotal			17.00	100%	100%	100%	421,314	421,314		
Total Complete		22.00	22.00	100%	100%	100%	421,314	421,314			

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

Hide Reviewer Comments

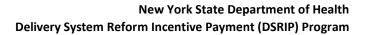
	Domain 4 Pay for Performance and Pay for Reporting				
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1		





Print

Print				
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				





Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Montefiore Hudson Valley Collaborative - Project 4.b.ii

Print Pass & Ongoing Percentage of adults who are obese 1 Enter Reviewer Comment 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-Pass & Ongoing 1 75 years 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



Save & Return

Print					
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					