

Achievement Value (AV) Scorecard Bronx-Lebanon Hospital Center

General Instructions								
Step	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 Line (Glick on the purple fline below to access each look whose project report) Domain 1- Organizational (All Projects) AV Adjustments (Jollann 8) 2 a 11 2 a 10 2 a 10 2 a 10 2 a 10 2 a 10
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



Achievement Value (AV) Scorecard Bronx-Lebanon Hospital Center

Print Summary

Print All

PPS Information					
Quarter DY1, Q4 January 1, 2016 - March 31, 2016					
PPS	Bronx-Lebanon Hospital Center				
PPS Number	27				

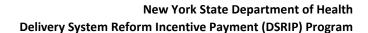
Achievement Value (AV) Scorecard Summary									
		AV I	Data			Payment Data			
Project Link (click on the purple link below to access each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned	
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizati	ional funds are project's	e embedded w payment	ithin each	
2.a.i	19.00	19.00	0.00	19.00	\$379,548.03	\$379,548.03	\$ -	\$379,548.03	
2.a.iii	20.00	20.00	0.00	20.00	\$283,525.28	\$283,525.28	\$ -	\$283,525.28	
2.b.i	20.00	20.00	0.00	20.00	\$232,844.50	\$232,844.50	\$ -	\$232,844.50	
2.b.iv	20.00	20.00	0.00	20.00	\$278,332.71	\$278,332.71	\$ -	\$278,332.71	
3.a.i	16.00	16.00	0.00	16.00	\$239,833.07	\$239,833.07	\$ -	\$239,833.07	
3.c.i	12.00	12.00	0.00	12.00	\$190,231.02	\$190,231.02	\$ -	\$190,231.02	
3.d.ii	10.00	10.00	0.00	10.00	\$203,601.75	\$203,601.75	\$ -	\$203,601.75	
3.f.i	13.00	13.00	0.00	13.00	\$209,961.00	\$209,961.00	\$ -	\$209,961.00	
4.a.iii	16.00	16.00	0.00	16.00	\$145,855.06	\$145,855.06	\$ -	\$145,855.06	



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Achievement Value (AV) Scorecard Bronx-Lebanon Hospital Center

4.c.ii	16.00	16.00	0.00	16.00	\$138,493.22	\$138,493.22	\$ -	\$138,493.22
AV Adjustments (Column F)								
Total	162.00	162.00	0.00	162.00	\$2,302,226	\$2,302,226	\$ -	\$2,302,226



NEW YORK STATE of Health Medicaid Redesign Team

Save & Return

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

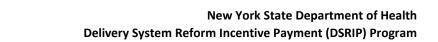
Bronx-Lebanon Hospital Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

	Workforce Strategy						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Workforce Strategy Budget Updates	3/31/2016	9/30/2016	In Process	Pass & Ongoing	
Workforce Strategy		Workforce Impact Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing	
Budget Updates							



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		New Hire Employment Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing
		Define target workforce state (in line	N/A	N/A	In Process	Pass & Ongoing
		with DSRIP program's goals)	19/7	1975	III T TOCC33	1 das & ongoing
		Create a workforce transition roadmap for achieving defined target workforce	9/30/2016	3/31/2016	In Process	Pass & Ongoing
Additional Workforce Strategy		3. Perform detailed gap analysis between current state assessment of workforce and projected future state	9/30/2016	3/31/2016	In Process	Pass & Ongoing
Budget						
Jpdates 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	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

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•	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	N/A
•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
						1
	•	Major Dependencies on Organizational Workstreams Roles and Responsibilities Key Stakeholders IT Expectations	Workstreams Roles and Responsibilities N/A Key Stakeholders N/A IT Expectations N/A	Major Dependencies on Organizational N/A N/A N/A Roles and Responsibilities N/A N/A Key Stakeholders N/A N/A IT Expectations N/A N/A Progress Reporting N/A N/A	Major Dependencies on Organizational 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	Major Dependencies on Organizational 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

	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 subcommittee structure	9/30/2015	9/30/2015	Completed	Pass & Complete			
Governance Structure		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete			



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Updates						
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete
Update						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	12/31/2015	12/31/2015	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	3/31/2016	3/31/2016	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	06/30/2018	06/30/2018	In Process	Pass & Ongoing
urivirig	ng)					
		8. Finalize workforce communication and engagement plan	06/30/2016	06/30/2016	In Process	Pass & Ongoing

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	9. Inclusion of CBOs in PPS Implementation	6/30/2016	03/31/2016	In Process	Pass & Ongoing					
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing					
						•				
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing					
						N/A				
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing					
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				1				



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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	12/31/2015	Completed	Pass & Complete	
Financial Stability		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	Completed	Pass & Complete	
Update							
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Completed	Pass & Complete	1
PPS	•	4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	9/30/2016	3/31/2016	In Process	Pass & Ongoing	
Transition to Value							
Based Payment System		5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
		6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	





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Additional					
PPS Transition to Value	7. Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	6/30/2019	6/30/2019	In Process	Pass & Ongoing
Based Payment					
System	8. ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs	6/30/2019	6/30/2019	In Process	Pass & Ongoing
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Additional Financial					
Stability Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing

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

	Section 04 - Cultural Competency & Health Literacy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	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	6/30/2016	In process	Pass & Ongoing	1		
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing			
		Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing			
Additional		Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing			



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Cultural Competency	•						N/A
/Health Literacy		Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	IN/A
Topic Areas							
		IT Expectations	N/A	N/A	In process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In process	Pass & Ongoing	
			Total				1

AV			Section 05 - IT Systems and Processes									
riving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded						
	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of	6/30/2016	6/30/2016	In process	Pass & Ongoing							
		12/31/2015	12/31/2015	Completed	Pass & Complete							
		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). Develop an IT Change Management Strategy.	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). 2. Develop an IT Change Management 12/31/2015	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). 2. Develop an IT Change Management 12/31/2015 12/31/2015	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). 2. Develop an IT Change Management 12/31/2015 12/31/2015 Completed	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). 2. Develop an IT Change Management 12/31/2015 12/31/2015 12/31/2015 Completed Pass & Complete						

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and Processes	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	6/30/2016	6/30/2016	In process	Pass & Ongoing	N/A
	4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2015	12/31/2015	Completed	Pass & Complete	
	5. Develop a data security and confidentiality plan.	9/30/2015	9/30/2015	Completed	Pass & Ongoing	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing	
.dditional						
Γ Systems nd	Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing	N/A
rocesses						NA
Topic Areas	Key Stakeholders	N/A	N/A	In process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In process	Pass & Ongoing	



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Domain 1 Organizational AVs

Total 0

	Section 06 - Performance Reporting								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
Performanc e Reporting	•	Establish reporting structure for PPS-wide performance reporting and communication.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A		
		Develop training program for							
	•	organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2018	6/30/2018	Not started	Pass & Ongoing	N/A		
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing			
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing			
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing			
Additional Performanc							N/A		



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e Reporting Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	tion 07 - Practitio	ner Engagement			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Practitioner Engagement	•	1. Develop Practitioners communication and engagement plan.	12/31/2016	12/31/2016	In process	Pass & Ongoing	
	•	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.	3/31/2017	3/31/2017	Not started	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing	



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	PIIII						
		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 ractitioner							N/A
ingagement 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	
			Total				0

	Section 08 - Population Health Management									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		Develop population health management roadmap.	6/30/2016	6/30/2016	In process	Pass & Ongoing	N/A			
Population							N/A			

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Health		2. Finalize PPS-wide bed reduction plan.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A		
							NA		
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing			
		Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing	N/A		
	•	Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing			
Additional Population									
Health 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				0		



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		1. Perform a clinical integration 'needs assessment'.	6/30/2016	6/30/2016	In process	Pass & Ongoing	N/A	
Clinical							IN/A	
Integration		2. Develop a Clinical Integration strategy.	6/30/2016	6/30/2016	In process	Pass & Ongoing	N/A	
							IN/A	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In process	Pass & Ongoing		
		Major Dependencies on Organizational Workstreams	N/A	N/A	In process	Pass & Ongoing		
		Roles and Responsibilities	N/A	N/A	In process	Pass & Ongoing		
Additional Clinical							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		



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	Progress Reporting	N/A	N/A	In process	Pass & Ongoing	
		Total				0



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center AV Adjustments

	AV	Adjustment	Scoresheet						
	AVs Per Projects Total AVs Project Projects Available		Total AVs	Total AVs Awarded		Adiusted	Net AVs Awarded		
Adjustment			Available	Net	Percentage		Net	Deventors AV	
	riojett	Selected	ected	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	112.00	112.00	100%	0.00	112.00	100%	
Total				162.00	100%	0.00	162.00	100%	

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Bronx-Lebanon Hospital Center in DY1, Q4



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.a.i

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

Payment Snapshot							
Payment Available (DY1)	\$	1,897,740.16					
DY1 Initial Payment	\$	1,138,644.09					
DY1 Q2 Payment Earned	\$	341,593.23					
DY1 Payment Not Earned to Date	\$	37,954.80					
DY1 Funding Remaining	\$	379,548.03					
Funding Available for Distribution DY1Q4	\$	379,548.03					

	2.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				189,774
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	189,774	
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	189,774	189,774
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	189,774	189,774
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			14.00	14.00	100%	20%	10%	189,774	189,774
	Total	Complete	19.00	19.00	100%	100%	20%	379,548	379,548

Total Project 2.a.i AVs Awarded: 19 out of 19

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.i							
AV Drivir	g 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		



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Total						0.00	
	Domain 1 Project Prescribed						
AV Driving		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
•	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A	
•	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	In process	Pass & Ongoing	N/A	
•	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	In process	Pass & Ongoing	N/A	



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•	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	In process	Pass & Ongoing	N/A
	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	In process	Pass & Ongoing	N/A
	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.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
•	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	In process	Pass & Ongoing	N/A
	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		3/31/2017	3/31/2017	In process	Pass & Ongoing	



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10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers,	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
and culturally competent community-based organizations, as					
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333					
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1					
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25					



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Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1



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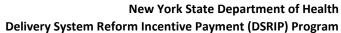
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards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



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Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total		14.00



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.a.iii

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

Payment Snapshot					
Payment Available (DY1)	\$	1,417,626.41			
DY1 Initial Payment	\$	850,575.85			
DY1 Q2 Payment Earned	\$	259,898.18			
DY1 Payment Not Earned to Date	\$	23,627.11			
DY1 Funding Remaining	\$	283,525.28			
Funding Available for Distribution DY1Q4	\$	283,525.28			

	2.a.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	% 10%	141,763	141,763
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	141,763	141,763
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	141,763	141,763
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		14.00	14.00	100%	20%	10%	141,763	141,763
	Total	Complete	20.00	20.00	100%	100%	20%	283,525	283,525

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

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	Domain 1 Project Milestones - Project 2.a.iii							
AV Dri ving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.a.iii

Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In process	Pass & Ongoing	N/A
					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1

Total

	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	In process	Pass & Ongoing	N/A
•	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	In process	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.a.iii

3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and 9/30/2018 Pass & Ongoing 9/30/2018 In process N/A sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up. 4. Ensure that EHR systems used by participating safety net providers 9/30/2018 9/30/2018 Pass & Ongoing In process N/A meet Meaningful Use and PCMH Level 3 standards and/or APCM. 5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all Pass & Ongoing 9/30/2018 9/30/2018 In process N/A participating safety net providers. 6. Develop a comprehensive care management plan for each patient to 9/30/2018 Pass & Ongoing 9/30/2018 In process N/A engage him/her in care and to reduce patient risk factors. 7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly 3/31/2017 3/31/2017 In process Pass & Ongoing N/A delineate roles and responsibilities for both parties. 8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. 3/31/2017 3/31/2017 Pass & Ongoing N/A In process Where necessary, the provider will work with local government units (such as SPOAs and public health departments).



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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	In process	Pass & Ongoing	N/A
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iii (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333					
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1					
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25					



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Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.a.iii

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



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Print Project 2					
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5			
Total		14.00			



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.b.i

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

Payment Snapshot				
Payment Available (DY1)	\$	1,164,222.50		
DY1 Initial Payment	\$	698,533.50		
DY1 Q2 Payment Earned	\$	213,440.79		
DY1 Payment Not Earned to Date	\$	19,403.71		
DY1 Funding Remaining	\$	232,844.50		
Funding Available for Distribution DY1Q4	\$	-		

	2.b.								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			116,422	116,422
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	116,422	116,422
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	116,422	116,422
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			14.00	14.00	100%	20%	10%	116,422	116,422
	Total	Complete	20.00	20.00	100%	100%	20%	232,845	232,845

Total Project 2.b.i AVs Awarded: 20 out of 20

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



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					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1
Total					1.00

	Domain 1 Project Prescribed	Milestones - I	Project 2.b.i			
AV Driving	V Driving Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
•	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A



Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 2.b.i

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4. Establish care managers co-located at each Ambulatory ICU site.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
6. Ensure that EHR systems used by participating providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-management.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the input of multiple providers.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care and utilization.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - Project 2.b.i

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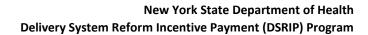
Total	0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.i (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333				
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333				
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333				
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1				
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25				
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25				



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Print	-Lebanon Hospital Center -	Project 2.b.i
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1





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



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - Project 2.b.i

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•	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Total		14.00



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - 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					
Payment Available (DY1)	\$	1,391,663.53			
DY1 Initial Payment	\$	834,998.12			
DY1 Q2 Payment Earned	\$	255,138.31			
DY1 Payment Not Earned to Date	\$	23,194.39			
DY1 Funding Remaining	\$	278,332.71			
Funding Available for Distribution DY1Q4	\$	278,332.71			

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	139,166	139,166			
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	139,166	139,166			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	139,166	139,166			
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-			
Domain 2 Subtotal		14.00	14.00	100%	20%	10%	139,166	139,166				
	Total	Complete	20.00	20.00	100%	100%	20%	278,333	278,333			

Total Project 2.b.iv AVs Awarded: 20 out of 20

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



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					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1
Total					1.00

	Domain 1 Project Prescribed I	Milestones - P	roject 2.b.iv			
AV Driving	AV Driving Project Requirement and Metric/Deliverable Room Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
	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.	3/31/2018	3/31/2018	In process	Pass & Ongoing	N/A
	Ensure required social services participate in the project.	3/31/2018	3/31/2018	In process	Pass & Ongoing	N/A
•	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	iii process	i ass & Oligonig	IV/A



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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	In process	Pass & Ongoing	N/A
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	In process	Pass & Ongoing	N/A
6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iv (all Milestones are P4R in DY1)					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333			
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333			



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Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years		0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5



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



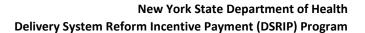
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - Project 2.b.iv

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

Total



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - 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				
Payment Available (DY1)	\$	1,199,165.35		
DY1 Initial Payment	\$	719,499.21		
DY1 Q2 Payment Earned	\$	219,846.98		
DY1 Payment Not Earned to Date	\$	19,986.09		
DY1 Funding Remaining	\$	239,833.07		
Funding Available for Distribution DY1Q4	\$	239,833.07		

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		10%	119,917	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%			119,917
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	119,917	119,917
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	119,917	119,917
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%		-	-
	Domain 3 Subtotal		10.00	10.00	100%	20%	10%	119,917	119,917
	Total	Complete	16.00	16.00	100%	100%	20%	239,833	239,833

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

	Domain 1 Project Milestones - Project 3.a.i						
AV Driving	V 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	In process	Pass & Ongoing	N/A	



Print			DI OIIX-	Lebunon Hospital Center -	rroject 3.u.i
					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1
Total					1

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3								
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3								
Model AV Project Requirement and Metric/Deliverable Driving Project Requirement and Metric/Deliverable Due Date Status Reviewer Status AV									
1. Co-loc practice s meet 201		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	In process	Pass & Ongoing	N/A		
	Develop collaborative evidence-based standards of care including medication management and care engagement process.		3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A		
3.a.i Model 1									



	Print				Bronx-	Lebanon Hospital Center -	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.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
			ı		1		
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
			ı	ı	ı		
		5. Co-locate primary care services at behavioral health sites.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
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.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A

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	Print				Bronx-l	Lebanon Hospital Center -	Project 3.a.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	In process	Pass & Ongoing	N/A
	•	11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
3.a.i Model 3	•	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
	•	13. Measure outcomes as required in the IMPACT Model.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	•	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2019	3/31/2019	In process	Pass & Ongoing	N/A
	•	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		Total					0





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AV Driving	Meas ure	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



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - 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					
Payment Available (DY1)	\$	951,155.10			
DY1 Initial Payment	\$	570,693.06			
DY1 Q2 Payment Earned		174378.4355			
DY1 Payment Not Earned to Date	\$	15,852.59			
DY1 Funding Remaining	\$	190,231.02			
Funding Available for Distribution DY1Q4	\$	190,231.02			

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	80%	80% 10%			95,116
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				10%	95,116	
	Patient Engagement Speed	Complete	1.00	1.00	100%						
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	95,116	95,116		
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	20%	10%	95,116	95,116		
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 2 Subtotal		6.00	6.00	100%	20%	10%	95,116	95,116		
	Total	Complete	12.00	12.00	100%	100%	20%	190,231	190,231		

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

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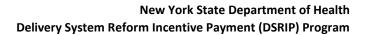
	Domain 1 Project Milestones - Project 3.c.i							
AV Driving Project Requirement and Metric/Deliverable		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In process	Pass & Ongoing	N/A		



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					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1
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.	3/31/2017	In process	Pass & Ongoing	N/A		
	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	In process	Pass & Ongoing	N/A		
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to	3/31/2017	In process	Pass & Ongoing	N/A		
	improve health literacy, patient self-efficacy, and patient self-management.	.,,,,,	,		,.		
	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	In process	Pass & Ongoing	N/A		





Print Bronx-Lebanon Hospital Center - Project 3.						
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2020	In process	Pass & Ongoing	N/A		
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	In process	Pass & Ongoing	N/A		
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	In process	Pass & Ongoing	N/A		
Total				0.00		

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.c.i (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1				
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1				
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1				



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Print	-Lebanon Hospital Center -	· Project 3.c.i
Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
Total		6.00



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - 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					
Payment Available (DY1)	\$	1,018,008.77			
DY1 Initial Payment	\$	610,805.26			
DY1 Q2 Payment Earned	\$	186,634.94			
DY1 Payment Not Earned to Date	\$	16,966.81			
DY1 Funding Remaining	\$	203,601.75			
Funding Available for Distribution DY1Q4	\$	203,601.75			

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	101,801	101,801		
	Patient Engagement Speed	Complete	1.00	1.00	100%						
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	101,801	101,801		
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	101,801	101,801		
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 2 Subtotal		4.00	4.00	100%	20%	10%	101,801	101,801		
	Total	Complete	10.00	10.00	100%	100%	20%	203,602	203,602		

Total Project 3.d.ii AVs Awarded: 10 out of 10

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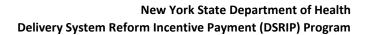
Domain 1 Project Milestones - Project 3.d.ii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In process	Pass & Ongoing	N/A



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Print Bronx-Lebanon Hospital Center - Project 3.d.						
					N/A	
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1	
Total						

	Domain 1 Project Prescribed I	Milestones - F	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.	6/30/2015	6/30/2015	Completed	Pass & Ongoing	N/A
•	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	6/30/2016	6/30/2016	In process	Pass & Ongoing	N/A
	Develop and implement evidence-based asthma management					
•	guidelines.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A





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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	In process	Pass & Ongoing	N/A
5. Ensure coordinated care for asthma patients includes social services and support.	6/30/2019	6/30/2019	In process	Pass & Ongoing	N/A
				'	
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	In process	Pass & Ongoing	N/A
· ·					
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	In process	Pass & Ongoing	N/A
8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
Total					0.00

Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.ii (all Milestones are P4R in DY1)						
AV Dri ving	Measure	Reviewer Status	AVs Awarded			

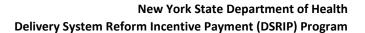


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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - Project 3.d.ii

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Total 4.0							
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1				
	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1				
•	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5				
•	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5				
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1				



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 3.f.i

Project Snapshot						
Project Domain Clinical Improvement Projects (Domain 3)						
Project ID	3.f.i					
Project Title	Increase support programs for maternal and child health (including high risk pregnancies)					

Payment Snapshot					
Payment Available (DY1)	\$	1,049,805.01			
DY1 Initial Payment	\$	629,883.01			
DY1 Q2 Payment Earned	\$	192,464.25			
DY1 Payment Not Earned to Date	\$	17,496.75			
DY1 Funding Remaining	\$	209,961.00			
Funding Available for Distribution DY1Q4	\$	209,961.00			

	3.f.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			104,981	104,981
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	0%	10%		
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	0%	10%	104,981	104,981
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	0%	10%	104,981	104,981
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 3 Subtotal	7.00	7.00	100%	0%	10%	104,981	104,981	
	Total	Complete	13.00	13.00	100%	0%	20%	209,961	209,961

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Total Project 3.f.i AVs Awarded: 13 out of 13

Domain 1 Project Milestones - Project 3.f.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		



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Print			Bronx	-Lebanon Hospital Center -	Project 3.f.i
					N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In process	Pass & Ongoing	1
Total					1

	Domain 1 Project Prescribed Milestones - Project 3.f.i Models 1, 2 and 3							
	✓ 3.f.i Model 2 ✓ 3.f.i Model 3							
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
		Implement an evidence-based home visitation model, such as the Nurse Family Partnership, for pregnant high-risk mothers including high-risk first time mothers.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A	
		Develop a referral system for early identification of women who are or may be at high-risk.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A	
3.f.i Model 1		and the driving at the grant to the				ı		
5.1.1 IVIOUEI 1		3. Establish a quality oversight committee of OB/GYN and primary care providers to monitor quality outcomes and implement new or change activities as appropriate.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A	

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 Bronx-Lebanon Hospital Center - Project 3.f.i

Print 4. Use EHRs or other IT platforms to track all patients 3/31/2017 3/31/2017 Pass & Ongoing N/A In process engaged in this project. 5. Identify and engage a regional medical center with expertise in management of high-risk pregnancies and infants Pass & Ongoing 3/31/2020 N/A 3/31/2020 On hold (must have Level 3 NICU services or Regional Perinatal Center). 6. Develop a multidisciplinary team of experts with clinical and social support expertise who will co-manage care of the 3/31/2020 3/31/2020 On hold Pass & Ongoing N/A high-risk mother and infant with local community obstetricians and pediatric providers. 7. Develop service MOUs between multidisciplinary team and 3/31/2020 3/31/2020 On hold Pass & Ongoing N/A OB/GYN providers. 8. Utilize best evidence care guidelines for management of high risk pregnancies and newborns and implement uniform Pass & Ongoing 3/31/2020 3/31/2020 On hold N/A clinical protocols based upon evidence-based guidelines. 3.f.i Model 2



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•	9. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
	10. Ensure that EHR systems or other IT platforms used by					
•	participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
	11. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On hold	Pass & Ongoing	N/A
	12. Develop a community nealth worker (Cnw) program on					
	the model of the Maternal and Infant Community Health Collaboratives (MICHC) program: access NYSDOH-funded CHW	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
•	13. Employ a Community Health Worker Coordinator responsible for supervision of 4 – 6 community health workers. Duties and qualifications are per NYS DOH criteria.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
	14. Employ quaimed candidates for Community nearth					
	Workers who meet criteria such as cultural competence,	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A



	Print				Bronx-	Lebanon Hospital Center -	Project 3.f.i
3.f.i Model 3							
		15. Establish protocols for deployment of CHW.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		16. Coordinate with the Medicaid Managed Care organizations serving the target population.	3/31/2017	3/31/2017	Not started	Pass & Ongoing	N/A
		17. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In process	Pass & Ongoing	N/A
		Total					0

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.f.i (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Childhood Immunization Status (Combination 3 – 4313314)	Pass & Ongoing	1				
	Early Elective Deliveries ±	Pass & Ongoing	1				
	Frequency of Ongoing Prenatal Care (81% or more)	Pass & Ongoing	1				



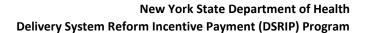
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 3.f.i

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	Total		7
	Well Care Visits in the first 15 months (5 or more Visits)	Pass & Ongoing	1
	Prevention Quality Indicator # 9 Low Birth Weight ±	Pass & Ongoing	1
•	Prenatal and Postpartum Care - Timeliness of Prenatal Care	Pass & Ongoing	0.5
	Duanatal and Dastmartum Cour. Timeliness of Duanatal Cour.	Dans & Outrains	0.5
	Prenatal and Postpartum Care - Postpartum Visits	Pass & Ongoing	0.5
	Lead Screening in Children	Pass & Ongoing	1



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 4.a.iii

	Project Snapshot						
Project Domain Domain 4: Population-wide Projects: New York's							
Project ID	Project ID 4.a.iii						
Project Title	Strengthen Mental Health and Substance Abuse Infrastructure Across Systems						

Payment Snapshot					
Payment Available (DY1)	\$	729,275.29			
DY1 Initial Payment	\$	437,565.17			
DY1 Q2 Payment Earned	\$	131,269.55			
DY1 Payment Not Earned to Date	\$	14,585.51			
DY1 Funding Remaining	\$	145,855.06			
Funding Available for Distribution DY1Q4	\$	145,855.06			

4.a.iii Score				esheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	72,928	72,928
Domain 1	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%	80%	10%	72,928	72,928
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	72,928	72,928
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		11.00	11.00	100%	20%	10%	72,928	72,928
	Total	Complete	16.00	16.00	100%	100%	20%	145,855	145,855

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY1)					
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		



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Time		
Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1



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Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total		11.00



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 4.c.ii

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

Payment Snapshot						
Payment Available (DY1)	\$	692,466.08				
DY1 Initial Payment	\$	415,479.65				
DY1 Q2 Payment Earned	\$	124,643.89				
DY1 Payment Not Earned to Date	\$	13,849.32				
DY1 Funding Remaining	\$	138,493.22				
Funding Available for Distribution DY1Q4	\$	138,493.22				

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	69,247	69,247
Domain 1	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%	80%	10%	69,247	69,247
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	69,247	69,247
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		11.00	11.00	100%	20%	10%	69,247	69,247
	Total	Complete	16.00	16.00	100%	100%	20%	138,493	138,493

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (all Milestones are P4R in DY1)					
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		



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Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1		
Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1		
Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1		
Percentage of premature death (before age 65 years)	Pass & Ongoing	1		
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1		
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1		



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Bronx-Lebanon Hospital Center - Project 4.c.ii

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Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total		11.00