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

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

Print Summary

Print All

Achievement Value (AV) Scorecard
NYU Lutheran Medical Center

PPS Information	
Quarter	DY1, Q4 January 1, 2016 - March 31, 2016
PPS	NYU Lutheran Medical Center
PPS Number	32

Achievement Value (AV) Scorecard Summary								
	AV 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	*Organizational funds are embedded within each project's payment*			
2.a.i	19.00	19.00	0.00	19.00	$397,926.59	$397,926.59	$ -	$397,926.59
2.b.iii	20.00	20.00	0.00	20.00	$283,971.21	$283,971.21	$ -	$283,971.21
2.b.ix	20.00	20.00	0.00	20.00	$255,209.03	$255,209.03	$ -	$255,209.03
2.c.i	20.00	20.00	0.00	20.00	$267,352.09	$267,352.09	$ -	$267,352.09
3.a.i	16.00	16.00	0.00	16.00	$262,502.51	$262,502.51	$ -	$262,502.51
3.c.i	12.00	12.00	0.00	12.00	$197,266.11	$197,266.11	$ -	$197,266.11
3.d.ii	10.00	9.00	0.00	9.00	$204,227.56	$187,208.60	$ -	$187,208.60
4.b.i	14.00	14.00	0.00	14.00	$175,885.08	$175,885.08	$ -	$175,885.08
4.c.ii	16.00	16.00	0.00	16.00	$145,337.95	$145,337.95	$ -	$145,337.95

Print Summary

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Achievement Value (AV) Scorecard
NYU Lutheran Medical Center

AV Adjustments (Column F)

| Total | 147.00 | 146.00 | 0.00 | 146.00 | $2,189,678 | $2,172,659 | $ - | $2,172,659 |

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

Save & Return

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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	●			*Please Select*	*Please Select*		
	●			*Please Select*	*Please Select*		

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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				Please Select	Please Select	
Additional Workforce Strategy Budget Updates (non AV-driving)	●	1. Define target workforce state (in line with DSRIP program's goals)		N/A	N/A	In Process	Pass & Ongoing	
	●	2. Create a workforce transition roadmap for achieving defined target workforce		N/A	N/A	In Process	Pass & Ongoing	
	●	3. Perform detailed gap analysis between current state assessment of workforce and projected future state		N/A	N/A	In Process	Pass & Ongoing	1
	●	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	

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

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	

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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Quarterly Project Reports, Project Budget and Flow of Funds		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	1
		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 02 Governance							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Governance Structure		1. Finalize governance structure and sub-committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	
		2. 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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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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Updates							1
	●	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process Update	●	4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
Additional Governance Milestones (non AV-driving)	●	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	12/31/2015	Completed	Pass & Complete	N/A
	●	6. Finalize partnership agreements or contracts with CBOs	N/A	6/30/2016	In Process	Pass & Ongoing	
	●	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	6/30/2016	In Process	Pass & Ongoing	
	●	8. Finalize workforce communication and engagement plan	N/A	6/30/2016	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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	●	9. Inclusion of CBOs in PPS Implementation	N/A	6/30/2016	In Process	Pass & Ongoing	
Additional Governance Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							1

Section 03   Financial Sustainability

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

NEW YORK STATE | **Department of Health** | **Medicaid Redesign Team**

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	9/30/2015	Completed	Pass & Complete	
	●	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	
	●	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 Transition to Value Based Payment System	●	4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	●	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	TBD	N/A	N/A	N/A	

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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Additional PPS Transition to Value Based Payment System	🟢	7. Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	TBD	N/A	N/A	N/A	N/A
	🟢	8. ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs	TBD	N/A	N/A	N/A	
Additional Financial Stability Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Enter Reviewer Comment					
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Enter Reviewer Comment					
	🔴	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	

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

Section 04	Cultural Competency & Health Literacy						
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Cultural Competency /Health Literacy	● (green)	1. Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete	1
	● (green)	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	
Additional	● (red)	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	● (red)	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	● (red)	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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Cultural Competency /Health Literacy Topic Areas	●						N/A
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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IT Systems and Processes			N/A	12/31/2015	In Process	Pass & Ongoing	N/A
	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	12/31/2015	In Process	Pass & Ongoing	N/A
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	3/31/2016	In Process	Pass & Ongoing	
	●	5. Develop a data security and confidentiality plan.	N/A	12/31/2015	In Process	Pass & Ongoing	
Additional IT Systems and Processes Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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	🔴						
Total							**0**

Section 06 Performance Reporting							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Performance Reporting	🔴	1. Establish reporting structure for PPS-wide performance reporting and communication.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
Additional Performanc	🔴	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

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
e Reporting Topic Areas	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 07 Practitioner 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.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
	●	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	N/A	6/30/2016	In Process	Pass & Ongoing	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

New York State Department of Health
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Additional Practitioner Engagement Topic Areas	●						N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 08 Population Health Management						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Population	●	1. Develop population health management roadmap.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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Health	●	2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	In Process	Pass & Ongoing	N/A
Additional Population Health Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 09   Clinical Integration

New York State Department of Health
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NYU Lutheran Medical Center - Domain 1 Organizational AVs

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Clinical Integration	🔴	1. Perform a clinical integration 'needs assessment'.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop a Clinical Integration strategy.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Domain 1 Organizational AVs

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

Save & Return

Print

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center AV Adjustments

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AV Adjustment Scoresheet								
Adjustment	**AVs Per Project**	**Total Projects Selected**	**Total AVs Available**	**Total AVs Awarded**		**Adjusted AVs**	**Net AVs Awarded**	
				Net Awarded	**Percentage AV**		**Net Awarded**	**Percentage AV**
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%
Project Adjustments (applied to one project only)	Various	9.00	102.00	101.00	99%	0.00	101.00	99%
Total			**147.00**	**146.00**	**99%**	**0.00**	**146.00**	**99%**

Hide Reviewer Comments

☐ Organizational   ☐ Project Adjustments

No AV Adjustments
🔴 *Please note that there are no AV adjustments for NYU Lutheran Medical Center in DY1, Q4*

🟢

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 2.a.i

Save & Return

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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)	$	1,989,632.97
DY1 Initial Payment	$	1,193,779.78
DY1 Q2 Payment Earned	$	397,926.59
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	397,926.59
Funding Available for Distribution DY1Q4	$	397,926.59

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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	198,963	198,963
	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%**	**198,963**	**198,963**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	198,963	198,963
	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%**	**198,963**	**198,963**
Total		**Complete**	**19.00**	**19.00**	**100%**	**100%**	**20%**	**397,927**	**397,927**

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

Hide Reviewer Comments

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

Save & Return

Print

●							
Total							**0.00**

Domain 1 Project Prescribed Milestones Project 2.a.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	9/30/2018	9/30/2018	Not Started	Pass & Ongoing	N/A
●	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	9/30/2018	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.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
●	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.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A

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●	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.	9/30/2018	3/31/2018	Not Started	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.	9/30/2018	3/31/2017	Not Started	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.	9/30/2018	3/31/2018	Not Started	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.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
●	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	9/30/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
●	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A

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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 appropriate.	9/30/2018	3/31/2018	Not Started	Pass & Ongoing	N/A

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	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
●	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
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25

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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
PDI 90– Composite of all measures +/-	Pass & Ongoing	1

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	Measure	Status	AV
	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
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5

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Total	**14.00**

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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Project Snapshot	
Project Domain	System Transformation Projects
Project ID	2.b.iii
Project Title	ED care triage for at-risk populations

Payment Snapshot		
Payment Available (DY1)	$	1,419,856.07
DY1 Initial Payment	$	851,913.64
DY1 Q2 Payment Earned	$	283,971.21
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	283,971.21
Funding Available for Distribution DY1Q4	$	283,971.21

2.b.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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	141,986	141,986
	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%**	**141,986**	**141,986**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	141,986	141,986
	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%**	**141,986**	**141,986**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**283,971**	**283,971**

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

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

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

Domain 1 Project Prescribed Milestones Project 2.b.iii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Establish ED care triage program for at-risk populations	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A

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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	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
●	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.)	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
●	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting Project 2.b.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	0.33333333

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●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
●	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
●	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

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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
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

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

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

Payment Snapshot		
Payment Available (DY1)	$	1,276,045.15
DY1 Initial Payment	$	765,627.09
DY1 Q2 Payment Earned	$	255,209.03
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	255,209.03
Funding Available for Distribution DY1Q4	$	255,209.03

2.b.ix 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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	127,605	127,605
	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%**	**127,605**	**127,605**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	127,605	127,605
	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%**	**127,605**	**127,605**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**255,209**	**255,209**

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

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

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

Domain 1 Project Prescribed Milestones Project 2.b.ix						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
●	2. Create clinical and financial model to support the need for the unit.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
●	3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.	9/30/2017	3/31/2017	Not Started	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 Direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
●	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting Project 2.b.ix (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	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1

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	Metric	Status	AV
	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
	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

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●	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
●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
●	Potentially Avoidable Readmissions	Pass & Ongoing	1

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	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**14.00**

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.c.i
Project Title	To develop a community based health navigation service to assist patients to access healthcare services efficiently

Payment Snapshot		
Payment Available (DY1)	$	1,336,760.47
DY1 Initial Payment	$	802,056.28
DY1 Q2 Payment Earned	$	267,352.09
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	267,352.09
Funding Available for Distribution DY1Q4	$	267,352.09

2.c.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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	133,676	133,676
	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%**	**133,676**	**133,676**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	133,676	133,676
	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%**	**133,676**	**133,676**
Total		**Complete**	**20.00**	**20.00**	**100%**	**100%**	**20%**	**267,352**	**267,352**

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

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Domain 1 Project Milestones Project 2.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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●						
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					**1.00**

Domain 1 Project Prescribed Milestones Project 2.c.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
●	2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.	9/30/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
●	4. Resource appropriately for the community navigators, evaluating placement and service type.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A

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●	5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
●	6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
●	7. Market the availability of community-based navigation services.	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
●	8. Use EHRs and other technical platforms to track all patients engaged in the project.	9/30/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	Total					**0.00**

Domain 2 Pay for Performance and Pay for Reporting Project 2.c.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	0.33333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333

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Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
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
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

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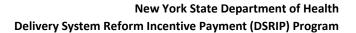Print

●	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
●	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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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		**14.00**

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 3.a.i

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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)	$	1,312,512.53
DY1 Initial Payment	$	787,507.52
DY1 Q2 Payment Earned	$	262,502.51
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	262,502.51
Funding Available for Distribution DY1Q4	$	262,502.51

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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	131,251	131,251
	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%**	**131,251**	**131,251**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	131,251	131,251
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			**10.00**	**10.00**	**100%**	**20%**	**10%**	**131,251**	**131,251**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**20%**	**262,503**	**262,503**

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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	**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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	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 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	In Process	Pass & Ongoing	N/A
3.a.i Model 1	●	2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A

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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	In Process	Pass & Ongoing	N/A
	●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
3.a.i Model 2	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	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	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A

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	●						
	●	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	●	11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
3.a.i Model 3	●	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	●	13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	●	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	●	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
Total							**0**

Domain 3 Pay for Performance and Pay for Reporting   Project 3.a.i (all Milestones are P4R in DY1)

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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
●	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5

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	Measure	Status	AV
	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**

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 3.c.i

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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)	$	986,330.56
DY1 Initial Payment	$	591,798.34
DY1 Q2 Payment Earned		197266.1119
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	197,266.11
Funding Available for Distribution DY1Q4	$	197,266.11

3.c.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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	98,633	98,633
	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%**	**98,633**	**98,633**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	20%	10%	98,633	98,633
	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%**	**98,633**	**98,633**
Total		**Complete**	**12.00**	**12.00**	**100%**	**100%**	**20%**	**197,266**	**197,266**

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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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 3.c.i

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🟢	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.	3/31/2018	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	Not Started	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 improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	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	Not Started	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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●	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Not Started	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	Not Started	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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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
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●	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
●	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.33333333
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.33333333
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.33333333
●	Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
	Total		**6.00**

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 3.d.ii

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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)	$	1,021,137.79
DY1 Initial Payment	$	612,682.68
DY1 Q2 Payment Earned	$	204,227.56
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	204,227.56
Funding Available for Distribution DY1Q4	$	204,227.56

3.d.ii 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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	102,114	85,095
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**6.00**	**5.00**	**83%**	**80%**	**10%**	**102,114**	**85,095**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	102,114	102,114
	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%**	**102,114**	**102,114**
Total		**Complete**	**10.00**	**9.00**	**90%**	**100%**	**20%**	**204,228**	**187,209**

Total Project 3.d.ii AVs Awarded: 9 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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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 3.d.ii

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🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	The PPS failed to meet at least 80% of its actively engaged commitments for DY1 Q4.					
Total						**0.00**

Domain 1 Project Prescribed Milestones Project 3.d.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce exposure	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Develop and implement evidence-based asthma management guidelines.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A

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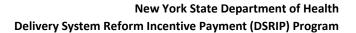
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●	4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
●	5. Ensure coordinated care for asthma patients includes social services and support.	3/31/2018	3/31/2018	Not Started	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.	3/31/2018	3/31/2017	Not Started	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.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	Not Started	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 Driving	**Measure**	**Reviewer Status**	**AVs Awarded**

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●	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**

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 4.b.i

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

Payment Snapshot		
Payment Available (DY1)	$	879,425.38
DY1 Initial Payment	$	527,655.23
DY1 Q2 Payment Earned	$	175,885.08
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	175,885.08
Funding Available for Distribution DY1Q4	$	175,885.08

4.b.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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	87,943	87,943
	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%**	**87,943**	**87,943**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	20%	10%	87,943	87,943
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		**9.00**	**9.00**	**100%**	**20%**	**10%**	**87,943**	**87,943**
Total		**Complete**	**14.00**	**14.00**	**100%**	**100%**	**20%**	**175,885**	**175,885**

Total Project 4.b.i AVs Awarded: 14 out of 14

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Domain 4 Pay for Performance and Pay for Reporting Project 4.b.i (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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	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
	Percentage of cigarette smoking among adults	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 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

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●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total			**9.00**

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 4.c.ii

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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)	$	726,689.75
DY1 Initial Payment	$	436,013.85
DY1 Q2 Payment Earned	$	145,337.95
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	145,337.95
Funding Available for Distribution DY1Q4	$	145,337.95

4.c.ii 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	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	72,669	72,669
	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%**	**72,669**	**72,669**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	72,669	72,669
	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%**	**72,669**	**72,669**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**20%**	**145,338**	**145,338**

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

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016
NYU Lutheran Medical Center - Project 4.c.ii

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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
NYU Lutheran Medical Center - Project 4.c.ii

●	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**