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

| Functionality | | |
|---|---|---|
| **Step** | **Description/Link** | **Image** |
| 1. Print | All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports. | Print All |
| 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 | Project Link (click on the purple link below to access each individual project report)  Domain I - Organizational (All Projects)  AV Adjustments (Column F)  2.a.i  2.a.ii  2.a.iii  2.a.iv  2.a.v  / Save & Return  Print |
| 3. Show or Hide reviewer comments | Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments. | Hide Reviewer Comments |

**Print Summary**

**Print All**

| PPS Information | |
|---|---|
| Quarter | DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) |
| PPS | North Country Initiative - Samaritan |
| PPS Number | 45 |

| Achievement Value (AV) Scorecard Summary | | | | | | |
|---|---|---|---|---|---|---|
| **Project Link (click on the purple link below to access each individual project report)** | **AV Data** | | | | **Payment Data** | |
| | AVs Available | AVs Awarded | AV Adjustment | Net AVs Awarded | DY3, Q2 Payment Available | DY3, Q2 Payment Earned |
| Domain I   Organizational (All Projects) | 5.00 | 5.00 | 0.00 | 5.00 | *Organizational funds are embedded within each project's payment* | |
| 2.a.i | 20.00 | 20.00 | 0.00 | 20.00 | $ 726,851 | $ 726,851 |
| 2.a.ii | 21.00 | 21.00 | 0.00 | 21.00 | $ 493,610 | $ 493,610 |
| 2.a.iv | 21.00 | 21.00 | 0.00 | 21.00 | $ 750,107 | $ 750,107 |
| 2.b.iv | 22.00 | 22.00 | 0.00 | 22.00 | $ 550,914 | $ 550,914 |
| 2.d.i | 10.00 | 10.00 | 0.00 | 10.00 | $ 477,305 | $ 477,305 |
| 3.a.i | 15.00 | 11.00 | 0.00 | 11.00 | $ 980,413 | $ 700,295 |
| 3.b.i | 14.00 | 14.00 | 0.00 | 14.00 | $ 722,955 | $ 722,955 |
| 3.c.i | 12.00 | 12.00 | 0.00 | 12.00 | $ 728,418 | $ 728,418 |
| 3.c.ii | 12.00 | 12.00 | 0.00 | 12.00 | $ 722,325 | $ 722,325 |

**Print Summary**

**Print All**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 4.a.iii | 16.00 | 16.00 | 0.00 | 16.00 | $ | 555,635 | $ 555,635 |
| 4.b.ii | 22.00 | 22.00 | 0.00 | 22.00 | $ | 472,290 | $ 472,290 |
| AV Adjustments (Column F) | | | | | | | |
| **Total** | **185.00** | **181.00** | **0.00** | **181.00** | **$** | **7,180,823** | **$ 6,900,705** |

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

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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 | ⬤ | | | | | | |
| | ⬤ | Workforce Strategy Spending (Baseline) | Ongoing | N/A | Completed | Pass & Complete | |

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

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*North Country Initiative - Samaritan - Domain 1 Organizational AVs*

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| | | | | | | |
|---|---|---|---|---|---|---|
| | ● | | | | | |
| 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 |
| | ● | 4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements | 6/30/2016 | N/A | Completed | Pass & Complete |
| | ● | 5. Develop training strategy | 6/30/2016 | N/A | Completed | Pass & Complete |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing |

1

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| | | | | | | |
|---|---|---|---|---|---|---|
| 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 |

(Additional Workforce Strategy Topic Areas AV Awarded: 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 | |

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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 | |
|---|---|---|---|---|---|---|---|
| | ● | Module 1.3 - PPS Flow of Funds (Baseline) | Ongoing | N/A | Completed | Pass & Complete | 1 |
| | ● | 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 | N/A | Completed | Pass & Complete | |
| | ● | 2.  Establish a clinical governance structure, including clinical quality committees for each DSRIP project | 12/31/2015 | N/A | Completed | Pass & Complete | |

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

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

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| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | ● | 9. Inclusion of CBOs in PPS Implementation | 6/30/2016 | N/A | Completed | Pass & Complete | |
| | | | | | | | |
| 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**

**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 | N/A | Completed | Pass & Complete | 1 |
| | 🟢 | 2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues. | 3/31/2016 | N/A | Completed | Pass & Complete | |
| | 🟢 | 3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d | 12/31/2015 | N/A | Completed | Pass & Complete | |
| | 🟢 | 4. Develop a Value Based Needs Assessment "VNA" | 3/31/2017 | N/A | Completed | Pass & Complete | |
| | 🔴 | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | 🔴 | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment*
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| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Additional Financial Stability Topic Areas | 🔴 | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| | 🔴 | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | 🔴 | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | 🔴 | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| **Total** | | | | | | | **1** |

| Section 04 Cultural Competency & Health Literacy | | | | | | | |
|---|---|---|---|---|---|---|---|
| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| Cultural Competency /Health Literacy | 🟢 | 1. Finalize cultural competency / health literacy strategy. | 12/31/2015 | N/A | Completed | Pass & Complete | 1 |
| | | | | | | | |
| | 🔴 | 2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material). | 3/31/2016 | N/A | Completed | Pass & Complete | |
| | | | | | | | |

**Department of Health** | Medicaid Redesign Team

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| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Additional Cultural Competency /Health Literacy 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 05   IT Systems and Processes**

| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
|---|---|---|---|---|---|---|---|

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

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| | | | | | | |
|---|---|---|---|---|---|---|
| IT Systems and Processes | ● | 1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). | 9/30/2016 | N/A | Complete | Pass & Complete |
| | | | | | | |
| | ● | 2. Develop an IT Change Management Strategy. | 12/31/2016 | N/A | Complete | Pass & Complete |
| | | | | | | |
| | ● | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network | 3/31/2016 | N/A | Complete | Pass & Complete |
| | | | | | | |
| | ● | 4. Develop a specific plan for engaging attributed members in Qualifying Entities | 6/30/2016 | N/A | Complete | Pass & Complete |
| | | | | | | |
| | ● | 5. Develop a data security and confidentiality plan. | N/A | N/A | 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 (Domain overall column)

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

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

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| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Additional Performance Reporting 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 07   Practitioner Engagement | | | | | | | |
|---|---|---|---|---|---|---|---|
| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| | ● | 1.  Develop Practitioners communication and engagement plan. | 12/31/2015 | N/A | Complete | Pass & Complete | |

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| | | | | | | |
|---|---|---|---|---|---|---|
| Practitioner Engagement | | 2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. | 12/31/2015 | N/A | Complete | Pass & Complete | N/A |
| Additional Practitioner Engagement Topic Areas | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | N/A |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |
| | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | |
| | | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |

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Print

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | ● | | | | | | |
| **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 Health | ● | 1.  Develop population health management roadmap. | 6/30/2016 | N/A | Complete | Pass & Complete | N/A |
| | ● | 2.  Finalize PPS-wide bed reduction plan. | 12/31/2016 | N/A | Complete | Pass & Complete | 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 | |

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| Save & Return |
|---|
| Print |

| | | | | | |
|---|---|---|---|---|---|
| ● | 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 | | | | | | |
|---|---|---|---|---|---|---|
| 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'. | 12/31/2016 | N/A | Completed | Pass & Complete | N/A |
| | ● | 2. Develop a Clinical Integration strategy. | 3/31/2016 | N/A | Completed | Pass & Complete | N/A |
| | ● | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | ● | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | ● | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |

Save & Return

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| Additional Clinical Integration 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** | | | | | | | **0** |

Save & Return

Print

| AV Adjustment Scoresheet | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Adjustment | AVs Per Project | Total Projects Selected | Total AVs Available | Total AVs Awarded | | Adjusted AVs | Net AVs Awarded | |
| | | | | Net Awarded | Percentage AV | | Net Awarded | Percentage AV |
| Organizational Adjustments (applied to all projects) | 5.00 | 11.00 | 55.00 | 55.00 | 100% | 0.00 | 55.00 | 100% |
| Project Adjustments (applied to one project only) | Various | 11.00 | 130.00 | 126.00 | 97% | 0.00 | 126.00 | 97% |
| **Total** | | | **185.00** | **181.00** | **98%** | **0.00** | **181.00** | **98%** |

Hide Reviewer Comments

☐ Organizational          ☐ Project Adjustments

| No AV Adjustments |
|---|
| *Please note that there are no AV adjustments for North Country Initiative - Samaritan in DY2, Q1* |

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

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - 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 | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 726,851 |
| **DY3, Q2 Payment Earned** | $ | 726,851 |

### 2.a.i Scoresheet

| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available ($) | Net Payment Earned ($) |
|---|---|---|---|---|---|---|---|---|---|
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 80% | 581,481 | 581,481 |
| | 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%** | **40%** | **80%** | **581,481** | **581,481** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 145,370 | 145,370 |
| | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **15.00** | **15.00** | **100%** | **60%** | **20%** | **145,370** | **145,370** |
| | **Total** | **Complete** | **20.00** | **20.00** | **100%** | **100%** | **100%** | **726,851** | **726,851** |

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

**Hide Reviewer Comments**

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

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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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 | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |

| **Total** | **0.00** |
|---|---|

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.i*

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| | | | |
|---|---|---|---|
| ● | 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** | | **15.00** |

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

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

| Project Snapshot | |
|---|---|
| Project Domain | System Transformation Projects (Domain 2) |
| Project ID | 2.a.ii |
| Project Title | Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the New York |

| Payment Snapshot | | |
|---|---|---|
| DY3, Q2 Payment Available | $ | 493,610 |
| DY3, Q2 Payment Earned | $ | 493,610 |
| | | |

| 2.a.ii Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available ($) | Net Payment Earned ($) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 80% | 394,888 | 394,888 |
| | 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%** | **40%** | **80%** | **394,888** | **394,888** |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 98,722 | 98,722 |
| | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **15.00** | **15.00** | **100%** | **60%** | **20%** | **98,722** | **98,722** |
| **Total** | | **Complete** | **21.00** | **21.00** | **100%** | **100%** | **100%** | **493,610** | **493,610** |

**Total Project 2.a.ii AVs Awarded: 21 out of 21**

Hide Reviewer Comments

| Domain 1 Project Milestones   Project 2.a.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 |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

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

| Domain 1 Project Prescribed Milestones   Project 2.a.ii | | | | | | |
|---|---|---|---|---|---|---|
| **AV Driving** | **Project Requirement and Metric/Deliverable** | **Required Due Date** | **Committed Due Date** | **Milestone Status** | **Reviewer Status** | **AVs Awarded** |
| ● | 1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 2. Identify a physician champion with knowledge of PCMH/APCM implementation for each primary care practice included in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

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| | | | | | | |
|---|---|---|---|---|---|---|
| ● | 4. Ensure 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. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 9. Implement open access scheduling in all primary care practices. | | | In Process | Pass & Ongoing | N/A |

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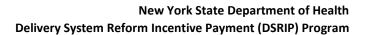**Delivery System Reform Incentive Payment (DSRIP) Program**

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

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| | | | |
|---|---|---|---|
| ● | *Enter Reviewer Comment* | | |
| | **Total** | | **0.00** |

| Domain 2 Pay for Performance and Pay for Reporting   Project 2.a.ii | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| ● | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Children's Access to Primary Care- 12 to 19 years | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | Children's Access to Primary Care- 12 to 24 months | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |

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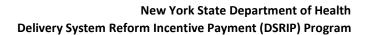**Delivery System Reform Incentive Payment (DSRIP) Program**

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

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| Print |

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

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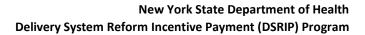| | | | |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1 | |
| | *Enter Reviewer Comment* | | |
| Percent of PCP meeting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

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.ii*

| | | | |
|---|---|---|---|
| ● | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **15.00** |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.iv*

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

| Payment Snapshot | | |
|---|---|---|
| DY3, Q2 Payment Available | $ | 750,107 |
| DY3, Q2 Payment Earned | $ | 750,107 |
| | | |

| 2.a.iv Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available ($) | Net Payment Earned ($) |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 80% | 600,086 | 600,086 |
| | 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%** | **40%** | **80%** | **600,086** | **600,086** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 150,021 | 150,021 |
| | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **15.00** | **15.00** | **100%** | **60%** | **20%** | **150,021** | **150,021** |
| | **Total** | **Complete** | **21.00** | **21.00** | **100%** | **100%** | **100%** | **750,107** | **750,107** |

**Total Project 2.a.iv AVs Awarded: 21 out of 21**

Hide Reviewer Comments

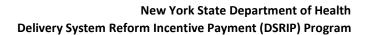| Domain 1 Project Milestones   Project 2.a.iv | | | | | | |
|---|---|---|---|---|---|---|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
| ● | Module  1 - Major risks to implementation and mitigation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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.iv*

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

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

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|---|---|---|---|---|---|---|
| 🟢 | 4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| 🟢 | 5. Use EHRs and other technical platforms to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| 🟢 | 6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2 | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| 🟢 | 7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| Domain 2 Pay for Performance and Pay for Reporting   Project 2.a.iv | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| 🟢 | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| 🟢 | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.iv*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.a.iv*

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| ● | Helpful, Courteous, and Respectful Office Staff (Q24 and 25) | Pass & Ongoing | 0.5 |
| | *Enter Reviewer Comment* | | |
| ● | H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Medicaid Spending on ER and Inpatient Services ± | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Medicaid spending on Primary Care and community based behavioral health care | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | PDI  90– Composite of all measures +/- | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement | Pass & Ongoing | 1 |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
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| | Metric | Status | Value |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | 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** | | | **15.00** |

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.b.iv*

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| 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 | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 550,914 |
| **DY3, Q2 Payment Earned** | $ | 550,914 |

| 2.b.iv Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 80% | 440,731 | 440,731 |
| | Project Implementation Speed | Complete | 1.00 | 1.00 | 100% | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | |
| | **Domain 1 Subtotal** | | **7.00** | **7.00** | **100%** | **40%** | **80%** | **440,731** | **440,731** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 110,183 | 110,183 |
| | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **15.00** | **15.00** | **100%** | **60%** | **20%** | **110,183** | **110,183** |
| | **Total** | **Complete** | **22.00** | **22.00** | **100%** | **100%** | **100%** | **550,914** | **550,914** |

**Total Project 2.b.iv AVs Awarded: 22 out of 22**

Hide Reviewer Comments

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.b.iv*

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| | | | | | | |
|---|---|---|---|---|---|---|
| | *Enter Reviewer Comment* | | | | | |
| | Module  2 - Project Implementation Speed | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | 1.00 |
| | *Enter Reviewer Comment* | | | | | |
| | Module  3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **2.00** |

| Domain 1 Project Prescribed Milestones   Project 2.b.iv | | | | | | |
|---|---|---|---|---|---|---|
| **AV Driving** | **Project Requirement and Metric/Deliverable** | **Required Due Date** | **Committed Due Date** | **Milestone Status** | **Reviewer Status** | **AVs Awarded** |
| | 1.  Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2.  Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.50 |
| | *Enter Reviewer Comment* | | | | | |
| | 3.  Ensure required social services participate in the project. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.50 |
| | *Enter Reviewer Comment* | | | | | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
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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 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 6. Ensure that a 30-day transition of care period is established. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 7. Use EHRs and other technical platforms to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **1.00** |

| Domain 2 Pay for Performance and Pay for Reporting Project 2.b.iv | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| ● | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |
| ● | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 |
| | *Enter Reviewer Comment* | | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.b.iv*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.b.iv*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.b.iv*

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| | | | |
|---|---|---|---|
| ● | Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | 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** | | | **15.00** |

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.d.i*

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

| Payment Snapshot | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 477,305 |
| **DY3, Q2 Payment Earned** | $ | 477,305 |

| 2.d.i Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 80% | 381,844 | 381,844 |
| | 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%** | **40%** | **80%** | **381,844** | **381,844** |
| **Domain 2** | Domain 2 Pay for Reporting (P4R) | Complete | 4.00 | 4.00 | 100% | 10% | 20% | 95,461 | 95,461 |
| | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **4.00** | **4.00** | **100%** | **60%** | **20%** | **95,461** | **95,461** |
| **Total** | | **Complete** | **10.00** | **10.00** | **100%** | **100%** | **100%** | **477,305** | **477,305** |

**Total Project 2.d.i AVs Awarded: 10 out of 10**

**Hide Reviewer Comments**

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

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

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

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

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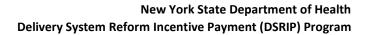**Delivery System Reform Incentive Payment (DSRIP) Program**

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

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| | | | | | | |
|---|---|---|---|---|---|---|
| ● | 4.  Survey the targeted population about healthcare needs in the PPS' region. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 5.  Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 6.  Obtain list of PCPs assigned to NU and LU enrollees from MCOs.  Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10). | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 7.  Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals.  Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 8.  Include beneficiaries in development team to promote preventive care. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 9.  Measure PAM® components | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 10.  Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons. | | | In Process | Pass & Ongoing | N/A |

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

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

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|---|---|---|---|---|---|---|
| ● | 17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **0.00** |

| Domain 2 Pay for Performance and Pay for Reporting   Project 2.d.i (all Milestones are P4R in DY2) | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| ● | C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor) | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff | Pass & Ongoing | 0.25 |
| | *Enter Reviewer Comment* | | |
| ● | ED use by uninsured | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 2.d.i*

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

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - 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 | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 980,413 |
| **DY3, Q2 Payment Earned** | $ | 700,295 |

| | 3.a.i Scoresheet | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 392,165 | 392,165 |
| | 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%** | **40%** | **40%** | **392,165** | **392,165** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 2.00 | 2.00 | 100% | 10% | 10% | 98,041 | 98,041 |
| | Domain 3 Pay for Performance | | 7.00 | 3.00 | 43% | 50% | 50% | 490,206 | 210,088 |
| **Domain 3 Subtotal** | | | **9.00** | **5.00** | **56%** | **60%** | **60%** | **588,248** | **308,130** |
| **Total** | | **Complete** | **15.00** | **11.00** | **73%** | **100%** | **100%** | **980,413** | **700,295** |

**Total Project 3.a.i AVs Awarded: 11 out of 15**

Hide Reviewer Comments

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.a.i*

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

| 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. | | | In Process | Pass & Ongoing | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 2. Develop collaborative evidence-based standards of care including medication management and care engagement process. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| 3.a.i Model 1 | | *Enter Reviewer Comment* | | | | | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.a.i*

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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. | | | In Process | Pass & Ongoing | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 4. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| 3.a.i Model 2 | ● | 5. Co-locate primary care services at behavioral health sites. | | | In Process | Pass & Ongoing | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 6. Develop collaborative evidence-based standards of care including medication management and care engagement process. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 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. | | | In Process | Pass & Ongoing | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 8. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | | *Enter Reviewer Comment* | | | | | |
| | ● | 9. Implement IMPACT Model at Primary Care Sites. | | | In Process | Pass & Ongoing | N/A |

**New York State Department of Health**
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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.a.i*

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

**Domain 3 Pay for Performance and Pay for Reporting**

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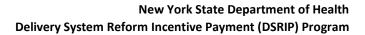| AV Driving | Measure | Reviewer Status | AVs Awarded |
|:---:|:---|:---:|:---:|
| ● | Adherence to Antipsychotic Medications for People with Schizophrenia | Pass & Ongoing | 1 |
| | P4P Measure DY3Q2 | | |
| ● | Antidepressant Medication Management - Effective Acute Phase Treatment | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Antidepressant Medication Management - Effective Continuation Phase Treatment | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia | N/A | N/A |
| | P4P Measure DY3Q2 | | |
| ● | Diabetes Monitoring for People with Diabetes and Schizophrenia | Pass & Ongoing | 1 |
| | P4P Measure DY3Q2 | | |
| ● | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Pass & Ongoing | 1 |
| | P4P Measure DY3Q2 | | |
| ● | Follow-up after hospitalization for Mental Illness - within 30 days | Fail | 0 |
| | P4P Measure DY3Q2 | | |

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.a.i*

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| | Measure | Status | AV |
|---|---|---|---|
| ● | Follow-up after hospitalization for Mental Illness - within 7 days | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Follow-up care for Children Prescribed ADHD Medications - Initiation Phase | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days) | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ± | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| ● | Screening for Clinical Depression and follow-up | Pass & Ongoing | 1 |
| | P4R Measure DY3Q2 | | |
| **Total** | | | **5.00** |

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

| Payment Snapshot | | |
|---|---|---|
| DY3, Q2 Payment Available | $ | 722,955 |
| DY3, Q2 Payment Earned | $ | 722,955 |
| | | |

| 3.b.i Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available ($) | Net Payment Earned ($) |
| Domain 1 | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 289,182 | 289,182 |
| | 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%** | **40%** | **40%** | **289,182** | **289,182** |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 8.00 | 8.00 | 100% | 10% | 60% | 433,773 | 433,773 |
| | Domain 3 Pay for Performance (P4P) | | 0.00 | 0.00 | N/A | 50% | 0% | - | - |
| | **Domain 3 Subtotal** | | **8.00** | **8.00** | **100%** | **60%** | **60%** | **433,773** | **433,773** |
| **Total** | | **Complete** | **14.00** | **14.00** | **100%** | **100%** | **100%** | **722,955** | **722,955** |

**Total Project 3.b.i AVs Awarded: 14 out of 14**

Hide Reviewer Comments

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

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Delivery System Reform Incentive Payment (DSRIP) Program

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.b.i*

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

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.b.i*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.b.i*

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| | | | | | | |
|---|---|---|---|---|---|---|
| ● | 11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 12. Document patient driven self-management goals in the medical record and review with patients at each visit. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 14. Develop and implement protocols for home blood pressure monitoring with follow up support. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 16. Facilitate referrals to NYS Smoker's Quitline. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk | | | In Process | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | | |
| ● | 18. Adopt strategies from the Million Hearts Campaign. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A |

**New York State Department of Health**
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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.b.i*

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

| Domain 3 Pay for Performance and Pay for Reporting | | |
|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |

| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
|---|---|---|---|
| ● | Aspirin Use | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Discussion of Risks and Benefits of Aspirin Use | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Controlling High Blood Pressure | Pass & Ongoing | 1 |
| | P4R Measure DY3Q2 | | |
| ● | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 |
| | P4R Measure DY3Q2 | | |

**New York State Department of Health**
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|---|---|---|---|
| ● | Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 |
| | P4R Measure DY3Q2 | | |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.3333333 |
| | P4R Measure DY3Q2 | | |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 |
| | P4R Measure DY3Q2 | | |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 |
| | P4R Measure DY3Q2 | | |
| ● | Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80% | Pass & Ongoing | 0.5 |
| | P4R Measure DY3Q2 | | |
| ● | Prevention Quality Indicator # 8 (Heart Failure)  ± | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| ● | Prevention Quality Indicator # 7 (HTN)  ± | Pass & Ongoing | 1 |

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| P4R Measure DY3Q2 | |
|---|---|
| **Total** | **8.00** |

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*North Country Initiative - Samaritan - 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 | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 728,418 |
| **DY3, Q2 Payment Earned** | $ | 728,418 |

| 3.c.i Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 291,367 | 291,367 |
| | 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%** | **40%** | **40%** | **291,367** | **291,367** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 6.00 | 6.00 | 100% | 10% | 60% | 437,051 | 437,051 |
| | Domain 3 Pay for Performance (P4P) | | 0.00 | 0.00 | N/A | 50% | 0% | - | - |
| | **Domain 2 Subtotal** | | **6.00** | **6.00** | **100%** | **60%** | **60%** | **437,051** | **437,051** |
| | **Total** | **Complete** | **12.00** | **12.00** | **100%** | **100%** | **100%** | **728,418** | **728,418** |

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

**Hide Reviewer Comments**

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

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

| Domain 1 Project Prescribed 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. | | | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | |
| | 2.  Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices. | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | |
| | 3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management. | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | |
| | 4.  Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods. | 3/31/2017 | Completed | Pass & Complete | N/A |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.c.i*

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| | | | | | |
|---|---|---|---|---|---|
| | *Enter Reviewer Comment* | | | | |
| | 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. | | | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | |
| | 6. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | |
| | 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. | | | Pass & Ongoing | N/A |
| | *Enter Reviewer Comment* | | | | |
| **Total** | | | | | **0.00** |

| Domain 3 Pay for Performance and Pay for Reporting | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)  ± | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| | Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor) | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |

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|---|---|---|
| Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 |
| P4R Measure in DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.3333333 |
| P4R Measure in DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 |
| P4R Measure in DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 |
| P4R Measure in DY3Q2 | | |
| Prevention Quality Indicator # 1 (DM Short term complication)  ± | Pass & Ongoing | 1 |
| P4R Measure in DY3Q2 | | |
| **Total** | | **6.00** |

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.c.ii*

| Project Snapshot | |
|---|---|
| **Project Domain** | Clinical Improvement Projects (Domain 3) |
| **Project ID** | 3.c.ii |
| **Project Title** | Implementation of evidence-based strategies in the community to address chronic disease-primary and secondary prevention strategies (adult only). |

| Payment Snapshot | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 722,325 |
| **DY3, Q2 Payment Earned** | $ | 722,325 |
| | | |

| 3.c.ii Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 288,930 | 288,930 |
| | 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%** | **40%** | **40%** | **288,930** | **288,930** |
| **Domain 3** | Domain 3 Pay for Reporting (P4R) | Complete | 6.00 | 6.00 | 100% | 10% | 60% | 433,395 | 433,395 |
| | Domain 3 Pay for Performance (P4P) | | 0.00 | 0.00 | N/A | 50% | 0% | - | - |
| | **Domain 3 Subtotal** | | **6.00** | **6.00** | **100%** | **60%** | **60%** | **433,395** | **433,395** |
| | **Total** | **Complete** | **12.00** | **12.00** | **100%** | **100%** | **100%** | **722,325** | **722,325** |

**Total Project 3.c.ii AVs Awarded: 12 out of 12**

**Hide Reviewer Comments**

| Domain 1 Project Milestones   Project 3.c.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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*North Country Initiative - Samaritan - Project 3.c.ii*

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| | | | | | | |
|---|---|---|---|---|---|---|
| | *Enter Reviewer Comment* | | | | | |
| | Module 2 - Project Implementation Speed | 9/30/2016 | 9/30/2017 | Completed | Pass & Ongoing | 0.00 |
| | *Enter Reviewer Comment* | | | | | |
| | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | | | | |
| **Total** | | | | | | **1.00** |

| Domain 1 Project Prescribed Milestones   Project 3.c.ii | | | | | | |
|---|---|---|---|---|---|---|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded |
| | 1. Implement Center for Disease Control (CDC)-recognized National Diabetes Prevention Programs (NDPP) and/or create partnerships with community sites to refer patients to CDC-recognized programs. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 2. Use EHRs or other technical platforms to track all patients engaged in this project. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 3. Identify high-risk patients (including those at risk for onset of diabetes or with pre-diabetes) and establish referral process to institutional or community NDPP delivery sites. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |
| | *Enter Reviewer Comment* | | | | | |
| | 4. Ensure collaboration with PCPs and program sites to monitor progress and provide ongoing recommendations. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.c.ii*

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| | | | | | | |
|---|---|---|---|---|---|---|
| ● | | | | *Enter Reviewer Comment* | | |
| ● | 5. Establish lifestyle modification programs including diet, tobacco use, and exercise and medication compliance. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |
| | | | | *Enter Reviewer Comment* | | |
| ● | 6. Ensure coordination with Medicaid Managed Care organizations and Health Homes for eligible/involved patients. providers. | 9/30/2016 | 9/30/2016 | Completed | Pass & Complete | N/A |
| | | | | *Enter Reviewer Comment* | | |
| **Total** | | | | | | **0.00** |

| Domain 3 Pay for Performance and Pay for Reporting | | | |
|---|---|---|---|
| **AV Driving** | **Measure** | **Reviewer Status** | **AVs Awarded** |
| ● | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ± | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| ● | Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor) | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| ● | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| ● | Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |

New York State Department of Health
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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 3.c.ii*

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| | | | |
|---|---|---|---|
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.3333333 |
| | P4R Measure in DY3Q2 | | |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 |
| | P4R Measure in DY3Q2 | | |
| ● | Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 |
| | P4R Measure in DY3Q2 | | |
| ● | Prevention Quality Indicator # 1 (DM Short term complication) ± | Pass & Ongoing | 1 |
| | P4R Measure in DY3Q2 | | |
| | **Total** | | **6.00** |

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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.a.iii*

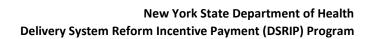| Project Snapshot | |
|---|---|
| Project Domain | Domain 4: Population-wide Projects: New York's |
| Project ID | 4.a.iii |
| Project Title | Strengthen Mental Health and Substance Abuse Infrastructure Across Systems |

| Payment Snapshot | | |
|---|---|---|
| DY3, Q2 Payment Available | $ | 555,635 |
| DY3, Q2 Payment Earned | $ | 555,635 |
| | | |

| 4.a.iii Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available ($) | Net Payment Earned ($) |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 222,254 | 222,254 |
| | 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%** | **40%** | **40%** | **222,254** | **222,254** |
| **Domain 4** | Domain 4 Pay for Reporting (P4R) | Complete | 11.00 | 11.00 | 100% | 60% | 60% | 333,381 | 333,381 |
| | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| | **Domain 4 Subtotal** | | **11.00** | **11.00** | **100%** | **60%** | **60%** | **333,381** | **333,381** |
| | **Total** | **Complete** | **16.00** | **16.00** | **100%** | **100%** | **100%** | **555,635** | **555,635** |

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

Hide Reviewer Comments

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.a.iii*

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

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.a.iii*

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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 |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **11.00** |

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.b.ii*

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

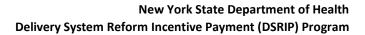| Payment Snapshot | | |
|---|---|---|
| **DY3, Q2 Payment Available** | $ | 472,290 |
| **DY3, Q2 Payment Earned** | $ | 472,290 |

| 4.b.ii Scoresheet | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Domain** | **Component** | **Review Status** | **AVs Available** | **Net AVs Awarded** | **Percentage AV** | **Domain Funding % (DY3)** | **Domain Funding % (DY3, Q2)** | **Payment Available ($)** | **Net Payment Earned ($)** |
| **Domain 1** | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% | 188,916 | 188,916 |
| | 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%** | **40%** | **40%** | **188,916** | **188,916** |
| **Domain 4** | Domain 4 Pay for Reporting (P4R) | Complete | 17.00 | 17.00 | 100% | 60% | 60% | 283,374 | 283,374 |
| | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| | **Domain 4 Subtotal** | | **17.00** | **17.00** | **100%** | **60%** | **60%** | **283,374** | **283,374** |
| **Total** | | **Complete** | **22.00** | **22.00** | **100%** | **100%** | **100%** | **472,290** | **472,290** |

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

**Hide Reviewer Comments**

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

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

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*North Country Initiative - Samaritan - Project 4.b.ii*

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| | | |
|---|---|---|
| *Enter Reviewer Comment* | | |
| Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Percentage of adults with health insurance - Aged 18- 64 years | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |
| Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years | Pass & Ongoing | 1 |
| *Enter Reviewer Comment* | | |

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

*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.b.ii*

| | | |
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| Save & Return | | |
| Print | | |

| | Measure | Status | Value |
|---|---|---|---|
| ● | Percentage of adults who are obese | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percentage of children and adolescents who are obese | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percentage of cigarette smoking among adults | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50-75 years | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Asthma emergency department visit rate per 10,000 | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Asthma emergency department visit rate per 10,000 - Aged 0-4 years | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Age-adjusted heart attack hospitalization rate per 10,000 | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| ● | Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years | Pass & Ongoing | 1 |

**New York State Department of Health**
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*Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)*
*North Country Initiative - Samaritan - Project 4.b.ii*

| | | | |
|---|---|---|---|
| Save & Return | | | |
| Print | | | |

| | | | |
|---|---|---|---|
| | *Enter Reviewer Comment* | | |
| | Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years | Pass & Ongoing | 1 |
| | *Enter Reviewer Comment* | | |
| | **Total** | | **17.00** |