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, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
PPS	Nassau Queens Performing Provider System, LLC
PPS Number	14

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, Q4 Payment Available**	**DY3, Q4 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	29.00	24.82	0.00	24.82	$ 12,929,239	$ 8,642,581
2.b.ii	30.00	24.85	0.00	24.85	$ 9,235,171	$ 5,856,637
2.b.iv	30.00	25.75	0.00	25.75	$ 9,927,809	$ 6,636,267
2.b.vii	30.00	25.00	0.00	25.00	$ 9,466,050	$ 6,057,145
2.d.i	15.00	13.78	0.00	13.78	$ 9,907,544	$ 8,172,414
3.a.i	17.00	12.75	0.00	12.75	$ 5,949,520	$ 4,393,083
3.a.ii	17.00	12.21	0.00	12.21	$ 5,695,022	$ 4,030,826
3.b.i	15.00	13.80	0.00	13.80	$ 4,490,611	$ 4,182,684
3.c.i	13.00	12.67	0.00	12.67	$ 4,617,585	$ 4,529,631

Print Summary

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Achievement Value (AV) Scorecard
Nassau Queens Performing Provider System, LLC

4.a.iii	16.00	16.00	0.00	16.00	$	3,078,390	$	3,078,390
4.b.i	22.00	22.00	0.00	22.00	$	3,540,149	$	3,540,149
AV Adjustments (Column F)								
Total	**234.00**	**203.63**	**0.00**	**203.63**	**$**	**78,837,091**	**$**	**59,119,807**

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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

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

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - 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	1
	●	2. Create a workforce transition roadmap for achieving defined target workforce	12/31/2016	N/A	Completed	Pass & Complete	
	●	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	12/31/2016	N/A	Completed	Pass & Complete	
	●	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	N/A	N/A	In Process	Pass & Ongoing	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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Additional Workforce Strategy Topic Areas	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	N/A
	🔴	Roles and Responsibilities	N/A	N/A	In Process	
	🔴	Key Stakeholders	N/A	N/A	In Process	
	🔴	IT Expectations	N/A	N/A	In Process	
	🔴	Progress Reporting	N/A	N/A	In Process	
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	
	🟢	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	

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

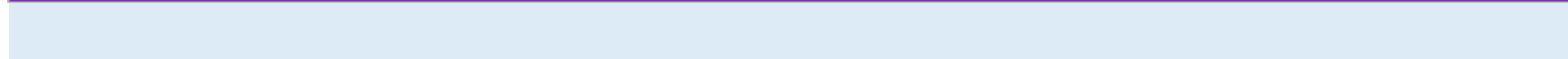*Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment*
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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

Section 02 - Governance						
Governance Structure Updates	●	1. Finalize governance structure and sub-committee structure	9/30/2015	N/A	Completed	
	●	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed	
	●	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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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,	3/31/2016	N/A	Completed	Pass & Complete	
	🔴	6. Finalize partnership agreements or contracts with CBOs	N/A	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	N/A	N/A	Completed	Pass & Complete	N/A
	🔴	8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete	
	🔴	9. Inclusion of CBOs in PPS Implementation	N/A	N/A	Completed	Pass & Complete	
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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

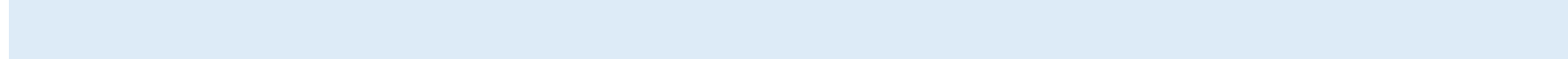*Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment*
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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

Section 03 - Financial Sustainability						
	🟢	1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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Financial Stability Update	●	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
Additional Financial Stability Topic Areas	●	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
	●	Key Stakeholders	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, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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		Milestone			Milestone Status	Reviewer Status	AV Awarded
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Cultural Competency /Health Literacy	●	1. Finalize cultural competency / health literacy strategy.	12/31/2015	N/A	Completed	Pass & Complete	1
	●	2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	N/A	Completed	Pass & Complete	
	●	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, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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Additional Cultural Competency /Health Literacy Topic Areas	●	Roles and Responsibilities	N/A	N/A	In Process
	●	Key Stakeholders	N/A	N/A	In Process
	●	IT Expectations	N/A	N/A	In Process
	●	Progress Reporting	N/A	N/A	In Process

N/A

Section 05 - 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).	3/31/2016	N/A	Complete
	●	2. Develop an IT Change Management Strategy.	9/30/2016	N/A	Complete

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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IT Systems and Processes	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	3/31/2017	N/A	Complete	Pass & Complete	N/A
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2017	N/A	Complete	Pass & Complete	
	●	5. Develop a data security and confidentiality plan.	9/30/2016	N/A	Complete	Pass & Complete	
Additional IT Systems and Processes Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Key Stakeholders	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, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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	●	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.	12/31/2016	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.	12/31/2016	N/A	Completed	Pass & Complete	N/A
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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Additional Performance Reporting 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**

Section 07 - Practitioner Engagement							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Practitioner Engagement	●	1. Develop Practitioners communication and engagement plan.	6/30/2016	N/A	Completed	Pass & Complete	N/A
	●	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	3/31/2017	N/A	Completed	Pass & Complete	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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

Section 08 - Population Health Management

Population	●	1. Develop population health management roadmap.	3/31/2016	N/A	Complete		N/A

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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Health	●	2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process		N/A
Additional Population Health Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process		
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process		
	●	Roles and Responsibilities	N/A	N/A	In Process		
							N/A
	●	Key Stakeholders	N/A	N/A	In Process		
	●	IT Expectations	N/A	N/A	In Process		
	●	Progress Reporting	N/A	N/A	In Process		

Section 09 - Clinical Integration

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Clinical Integration	●	1. Perform a clinical integration 'needs assessment'.	6/30/2016	N/A	Completed	Pass & Complete	N/A
	●	2. Develop a Clinical Integration strategy.	9/30/2016	N/A	Completed	Pass & Complete	N/A
Additional Clinical Integration Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment
Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

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			Total	0

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC AV Adj

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AV Adjustment Scoresheet								
Adjustment	AVs Per Project	Total Projects Selected	Total AVs Available	Total AVs Awarded		Adjusted AVs	Net AVs Awarded	
				Net Awarded	Percentage AV		Net Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	179.00	148.63	83%	0.00	148.63	83%
Total			**234.00**	**203.63**	**87%**	**0.00**	**203.63**	**87%**

☐ Organizational   ☐ Project Adjustments

No AV Adjustments
Please note that there are no AV adjustments for Nassau Queens Performing Provider System, LLC in DY2, Q1

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Project Snapshot	

Payment Snapshot		
DY3, Q4 Payment Available	$	12,929,239
DY3, Q4 Payment Earned	$	8,642,581

2.a.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	3,447,797	3,201,526
	Project Implementation Speed	Complete	1.00	0.57	57%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			**6.00**	**5.57**	**93%**	**40%**	**27%**	**3,447,797**	**3,201,526**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	861,949	861,949
	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.25	53%	50%	67%	8,619,493	4,579,106
Domain 2 Subtotal			**23.00**	**19.25**	**84%**	**60%**	**73%**	**9,481,442**	**5,441,055**
Total		**Complete**	**29.00**	**24.82**	**86%**	**100%**	**100%**	**12,929,239**	**8,642,581**

Total Project 2.a.i AVs Awarded: 24.82 out of 29

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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●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.57
	Enter Reviewer Comment					
	Total					**0.57**

	Domain 1 Project Prescribed Milestones Project 2.a.i					
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	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.	3/31/2018	3/31/2018	Completed	Fail	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - 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.	3/31/2018	3/31/2018	Completed	Fail	0.00
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	0.00
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - 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	3/31/2018	3/31/2018	Completed	0.14

Domain 2 Pay for Reporting - Project 2.a.i

●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0.3333333
●		0.3333333
●		0.3333333
●		1
●		0.25

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.a.i

Save & Return

Print

Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	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	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.a.i

Save & Return

Print

Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		**15.00**

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.a.i

Save & Return

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	Domain 2 Pay for Performance - Project 2.a.i		
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0
●			0
●			0
●			1
●			0.25
●			0
●			0
●			0
●			1
●			1
●			0
●			0
●			0.5
●			0.5

Save & Return

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.ii

Payment Snapshot		
DY3, Q4 Payment Available	$	9,235,171
DY3, Q4 Payment Earned	$	5,856,637

2.b.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	2,462,712	1,970,170
	Project Implementation Speed	Complete	1.00	0.60	60%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**7.00**	**5.60**	**80%**	**40%**	**27%**	**2,462,712**	**1,970,170**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	615,678	615,678
	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.25	53%	50%	67%	6,156,781	3,270,790
	Domain 2 Subtotal		**23.00**	**19.25**	**84%**	**60%**	**73%**	**6,772,459**	**3,886,468**
Total		**Complete**	**30.00**	**24.85**	**83%**	**100%**	**100%**	**9,235,171**	**5,856,637**

Total Project 2.b.ii AVs Awarded: 24.85 out of 30

Hide Reviewer Comments

Domain 1 Project Milestones Project 2.b.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
	Enter Reviewer Comment					

Save & Return

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●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.60
	Enter Reviewer Comment					
●					Fail	0
	Enter Reviewer Comment					
	Total					**0.60**

Domain 1 Project Prescribed Milestones - Project 2.b.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Ensure appropriate location of the co-located primary care services in the ED to be located on the same campus of the hospital. All relocated PCMH practices will meet NCQA 2014 Level 3 PCMH standards and/or APCM within 2 years after relocation.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	2. Ensure that new participating PCPs will meet NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. At start up, the participating PCPs must have open access scheduling extended hours, and have EHR capability that is interoperable with the ED.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●	3. Develop care management protocols for medical screening and PCP referral in compliance with EMTALA standards.	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, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.ii

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●	4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote self-management and knowledge on appropriate care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.)	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●					Pass & Complete	N/A
	Enter Reviewer Comment					
●					Fail	0.00
	Enter Reviewer Comment					
●					Pass & Complete	N/A
	Enter Reviewer Comment					
Total						**0.60**

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.ii

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	Domain 2 Pay for Reporting Project 2.b.ii	
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0.3333333
◗		0.3333333
◗		0.3333333
◗		1
◗		0.25
◗		0.25
◗		0.25

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Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	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		
	Pass & Ongoing	1
Enter Reviewer Comment		

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.ii

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●	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement		1
●			1
●			1
●			1
●			0.5
●			0.5

Domain 2 Pay for Performance   Project 2.b.ii

●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.ii

	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	0.25
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	0.5
	Enter Reviewer Comment		
		Pass & Ongoing	0.5
	Enter Reviewer Comment		
Total			**4.25**

Save & Return

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 2.b.iv

Project Snapshot	

Payment Snapshot		
DY3, Q4 Payment Available	$	9,927,809
DY3, Q4 Payment Earned	$	6,636,267

2.b.iv Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	2,647,416	2,458,315
	Project Implementation Speed	Complete	1.00	0.50	50%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.50**	**93%**	**40%**	**27%**	**2,647,416**	**2,458,315**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	661,854	661,854
	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.25	53%	50%	67%	6,618,539	3,516,099
	Domain 2 Subtotal		**23.00**	**19.25**	**84%**	**60%**	**73%**	**7,280,393**	**4,177,953**
Total		**Complete**	**30.00**	**25.75**	**86%**	**100%**	**100%**	**9,927,809**	**6,636,267**

Total Project 2.b.iv AVs Awarded: 25.75 out of 30

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
	Enter Reviewer Comment					

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 2.b.iv

●	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Complete	0.50
	Enter Reviewer Comment					
					Pass & Ongoing	1
●	*Enter Reviewer Comment*					
	Total					**1.50**

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.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.50
	Enter Reviewer Comment					
●	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	Fail	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 2.b.iv

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	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		N/A
●						N/A
●						N/A

Domain 2 Pay for Reporting   Project 2.b.iv

●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0.3333333
●			0.3333333
●			0.3333333

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	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	0.25
	Enter Reviewer Comment		
		Pass & Ongoing	0.25
	Enter Reviewer Comment		
		Pass & Ongoing	0.25
	Enter Reviewer Comment		
		Pass & Ongoing	0.25
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		

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●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	Enter Reviewer Comment		
●	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		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		

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●	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Reviewer Comment		
		Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		**15.00**

Domain 2 Pay for Performance Project 2.b.iv			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

Vassau Queens Performing Provider System, LLC - Project 2.b.iv

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Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		**4.25**

Save & Return

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.vii

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

Payment Snapshot			
DY3, Q4 Payment Available		$	9,466,050
DY3, Q4 Payment Earned		$	6,057,145

2.b.vii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	2,524,280	2,073,516
	Project Implementation Speed	Complete	1.00	0.75	75%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**7.00**	**5.75**	**82%**	**40%**	**27%**	**2,524,280**	**2,073,516**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	631,070	631,070
	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.25	53%	50%	67%	6,310,700	3,352,559

Total Project 2.b.vii AVs Awarded: 25 out of 30

Hide Reviewer Comments

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

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○	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.75
	Enter Reviewer Comment					
○					Fail	0
	Enter Reviewer Comment					
	Total					**0.75**

	Domain 1 Project Prescribed Milestones - Project 2.b.vii					
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
○	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.25
	Enter Reviewer Comment					
○	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
○	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
○					Pass & Ongoing	0.25
	Enter Reviewer Comment					

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●	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed		N/A
●						N/A
●						N/A
●						0.00
●						0.25
●						N/A

Domain 2 Pay for Reporting   Project 2.b.vii

●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.vii

Save & Return

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Enter Reviewer Comment		
	Pass & Ongoing	0.3333333
Enter Reviewer Comment		
	Pass & Ongoing	0.3333333
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
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	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.b.vii

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Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	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		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	

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	1
	1
	0.5
	0.5

Domain 2 Pay for Performance   Project 2.b.vii

Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0
		0
		0

Save & Return

Print

Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		**4.25**

NEW YORK STATE | Department of Health | Medicaid Redesign Team

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

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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, Q4 Payment Available	$	9,907,544
DY3, Q4 Payment Earned	$	8,172,414

2.d.i Scoresheet

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	2,642,012	2,558,138
	Project Implementation Speed	Complete	1.00	0.78	78%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**6.78**	**97%**	**40%**	**27%**	**2,642,012**	**2,558,138**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	7%	660,503	660,503
	Domain 2 Pay for Performance (P4P)	Complete	4.00	3.00	75%	50%	67%	6,605,030	4,953,772
Domain 2 Subtotal			**8.00**	**7.00**	**88%**	**60%**	**73%**	**7,265,533**	**5,614,275**
Total		**Complete**	**15.00**	**13.78**	**92%**	**100%**	**100%**	**9,907,544**	**8,172,414**

Total Project 2.d.i AVs Awarded: 13.78 out of 15

| 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
	Enter Reviewer Comment					

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.78
●					Pass & Ongoing	1
		Enter Reviewer Comment				
	Total					**1.78**

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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	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					
					Pass & Complete	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

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	Enter Reviewer Comment					
5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	Enter Reviewer Comment					
6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	Enter Reviewer Comment					
				Pass & Complete	N/A
	Enter Reviewer Comment					
9. Measure PAM® components	3/31/2018	3/31/2018	Completed	Fail	0.000
	Enter Reviewer Comment					
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2018	3/31/2018	Completed	Fail	0.000
	Enter Reviewer Comment					

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

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●	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	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	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	Enter Reviewer Comment					
●	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	Enter Reviewer Comment					
●	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.111
	Enter Reviewer Comment					
●	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

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

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	Domain 2 Pay for Reporting Project 2.d.i		
●	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information		0.25
●			0.25
●			0.25
●			0.25
●			1
●			1
●			

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 2.d.i

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

Domain 2 Pay for Performance Project 2.d.i			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Pass & Ongoing	
	Enter Reviewer Comment		
⬤		Fail	
	Enter Reviewer Comment		
	Total		**3.00**

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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.a.i
Project Title	Integration of primary care and behavioral health services

Payment Snapshot		
DY3, Q4 Payment Available	$	5,949,520
DY3, Q4 Payment Earned	$	4,393,083

3.a.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	2,379,808	2,124,828
	Project Implementation Speed	Complete	1.00	0.25	25%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.25**	**89%**	**40%**	**40%**	**2,379,808**	**2,124,828**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	594,952	594,952
	Domain 3 Pay for Performance		8.00	4.50	56%	50%	50%	2,974,760	1,673,302
	Domain 3 Subtotal		**10.00**	**6.50**	**65%**	**60%**	**60%**	**3,569,712**	**2,268,254**
Total		**Complete**	**17.00**	**12.75**	**75%**	**100%**	**100%**	**5,949,520**	**4,393,083**

Total Project 3.a.i AVs Awarded: 12.75 out of 17

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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
	Enter Reviewer Comment					

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●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.25
	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**
3.a.i Model 1	●	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	Completed	Fail	0
		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
		Enter Reviewer Comment					
	●	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	0
		Enter Reviewer Comment					

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.a.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		N/A
							0.25
3.a.i Model 2	●					*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.	3/31/2018	3/31/2018	Completed	Fail	0
							N/A
	●						

Domain 3 Pay for Reporting		
AV Driving	**Measure**	**Reviewer Status** / **AVs Awarded**
●	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	0.5

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.a.i

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●	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase		0.5
●			1

Domain 3 Pay for Performance	

●	Adherence to Antipsychotic Medications for People with Schizophrenia		0
●			0.5
●			0.5
●			1
●			0
●			1
●			0.5
●			0.5
●			0.5

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●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)		0
	P4P Measure DY3, Q4		
●		Fail	0
	P4P Measure DY3, Q4		
	Total		**4.50**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.a.ii

Payment Snapshot		
DY3, Q4 Payment Available	$	5,695,022
DY3, Q4 Payment Earned	$	4,030,826

3.a.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	2,278,009	1,859,599
	Project Implementation Speed	Complete	1.00	0.71	71%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**7.00**	**5.71**	**82%**	**40%**	**40%**	**2,278,009**	**1,859,599**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	569,502	569,502
	Domain 3 Pay for Performance (P4P)		8.00	4.50	56%	50%	50%	2,847,511	1,601,725
	Domain 2 Subtotal		**10.00**	**6.50**	**65%**	**60%**	**60%**	**3,417,013**	**2,171,227**
	Total	**Complete**	**17.00**	**12.21**	**72%**	**100%**	**100%**	**5,695,022**	**4,030,826**

Total Project 3.a.ii AVs Awarded: 12.21 out of 17

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Domain 1 Project Milestones Project 3.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
	Enter Reviewer Comment					

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.a.ii

●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.71
	Enter Reviewer Comment					
●					Fail	0
	Enter Reviewer Comment					
	Total					**0.71**

Domain 1 Project Prescribed Milestones - Project 3.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●					Pass & Complete	N/A
	Enter Reviewer Comment					

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●	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14
	Enter Reviewer Comment					
●	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
					Pass & Complete	

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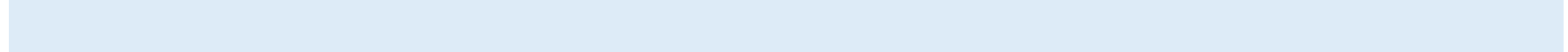**Delivery System Reform Incentive Payment (DSRIP) Program**

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.a.ii

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Domain 3 Pay for Reporting		
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase		0.5
		0.5
		1

Domain 3 Pay for Performance		
Adherence to Antipsychotic Medications for People with Schizophrenia		0

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
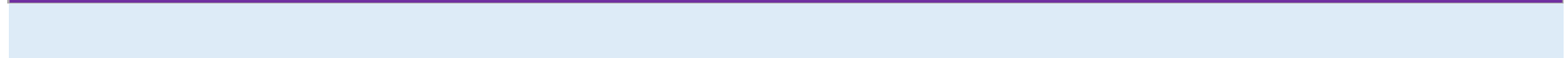*Nassau Queens Performing Provider System, LLC - Project 3.a.ii*

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●	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	P4P Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4P Measure DY3, Q4		
		Pass & Ongoing	1
	P4P Measure DY3, Q4		
		Fail	0
	P4P Measure DY3, Q4		
		Pass & Ongoing	1
	P4P Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4P Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4P Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4P Measure DY3, Q4		

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	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)		0
●	P4P Measure DY3, Q4		
		Fail	0
●	P4P Measure DY3, Q4		
	Total		**4.50**

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.b.i

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

Payment Snapshot		
DY3, Q4 Payment Available	$	4,490,611
DY3, Q4 Payment Earned	$	4,182,684

3.b.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	1,796,245	1,488,317
	Project Implementation Speed	Complete	1.00	0.80	80%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**7.00**	**5.80**	**83%**	**40%**	**40%**	**1,796,245**	**1,488,317**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	8.00	8.00	100%	10%	60%	2,694,367	2,694,367
	Domain 3 Pay for Performance (P4P)		0.00	0.00	N/A	50%	0%	-	-
Domain 2 Subtotal			**8.00**	**8.00**	**100%**	**60%**	**60%**	**2,694,367**	**2,694,367**
Total		**Complete**	**15.00**	**13.80**	**92%**	**100%**	**100%**	**4,490,611**	**4,182,684**

Total Project 3.b.i AVs Awarded: 13.8 out of 15

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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
	Enter Reviewer Comment					

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.b.i

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●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.80
	Enter Reviewer Comment					
●					Fail	0
	Enter Reviewer Comment					
	Total					**0.80**

Domain 1 Project Prescribed Milestones - Project 3.b.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
	Enter Reviewer Comment					
●	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
					Pass & Complete	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.b.i

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	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).	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
	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.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
	Enter Reviewer Comment					
	9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
	Enter Reviewer Comment					
					Pass & Complete	

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.b.i

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				Enter Reviewer Comment		
	12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
				Enter Reviewer Comment		
	13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
				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	3/31/2018	3/31/2018	Completed	Pass & Ongoing	0.10
				Enter Reviewer Comment		
	18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	Completed	Fail	N/A
				Enter Reviewer Comment		
	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	

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		N/A

Domain 3 Pay for Performance and Pay for Reporting		
Aspirin Use		0.5
		0.5
		1
		1
		1

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●	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	P4R Measure DY3, Q4		
		Pass & Ongoing	0.3333333
	P4R Measure DY3, Q4		
		Pass & Ongoing	0.3333333
	P4R Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4R Measure DY3, Q4		
		Pass & Ongoing	0.5
	P4R Measure DY3, Q4		
		Pass & Ongoing	1
	P4R Measure in DY3, Q4		
		Pass & Ongoing	1
	P4R Measure DY3, Q4		
Total			**8.00**

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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, Q4 Payment Available	$	4,617,585
DY3, Q4 Payment Earned	$	4,529,631

3.c.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	1,847,034	1,759,080
	Project Implementation Speed	Complete	1.00	0.67	67%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.67**	**95%**	**40%**	**40%**	**1,847,034**	**1,759,080**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	60%	2,770,551	2,770,551
	Domain 3 Pay for Performance (P4P)		0.00	0.00	N/A	50%	0%	-	-
	Domain 2 Subtotal		**6.00**	**6.00**	**100%**	**60%**	**60%**	**2,770,551**	**2,770,551**
	Total	**Complete**	**13.00**	**12.67**	**97%**	**100%**	**100%**	**4,617,585**	**4,529,631**

Total Project 3.c.i AVs Awarded: 12.67 out of 13

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.c.i

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	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.67
●	*Enter Reviewer Comment*					
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Enter Reviewer Comment					
	Total					**1.67**

Domain 1 Project Prescribed Milestones - Project 3.c.i					
AV Driving	**Project Requirement and Metric/Deliverable**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	Completed	Pass & Complete	0.33
	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	Fail	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
	Enter Reviewer Comment				

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 3.c.i

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●	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Completed	Pass & Complete	0.33
	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.	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment				
Total					**0.67**

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 DY3, Q4	
●	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing / 1
	P4R Measure in DY3, Q4	
●	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing / 1
	P4R Measure in DY3, Q4	
●	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing / 1

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	P4R Measure in DY3, Q4		
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	P4R Measure in DY3, Q4		
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
	P4R Measure in DY3, Q4		
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
	P4R Measure in DY3, Q4		
	Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
	P4R Measure in DY3, Q4		
Total			**6.00**

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 4.a.iii

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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, Q4 Payment Available	$	3,078,390
DY3, Q4 Payment Earned	$	3,078,390

4.a.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	1,231,356	1,231,356
	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%**	**1,231,356**	**1,231,356**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	60%	60%	1,847,034	1,847,034
	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%**	**1,847,034**	**1,847,034**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**100%**	**3,078,390**	**3,078,390**

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in 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
	Enter Reviewer Comment		

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 4.a.iii

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●	Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Vassau Queens Performing Provider System, LLC - Project 4.a.iii

●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years		1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		**11.00**

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

Payment Snapshot	

4.b.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY3)**	**Domain Funding % (DY3, Q4)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40%	1,416,060	1,416,060
	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%**	**1,416,060**	**1,416,060**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	60%	60%	2,124,089	2,124,089
	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%**	**2,124,089**	**2,124,089**
	Total	**Complete**	**22.00**	**22.00**	**100%**	**100%**	**100%**	**3,540,149**	**3,540,149**

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

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

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●	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		
●		Pass & Ongoing	1
	Enter Reviewer Comment		

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 4.b.i

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Percentage of children and adolescents who are obese	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		

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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
Nassau Queens Performing Provider System, LLC - Project 4.b.i

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Total	17.00