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	The New York Presbyterian Hospital of Queens
PPS Number	40

Achievement Value (AV) Scorecard Summary					
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00	*Organizational funds are embedded within each project's payment*

2.b.vii	29.00	24.50	0.00	24.50	$	321,197	$	200,748
2.b.viii	30.00	25.30	0.00	25.30	$	334,748	$	206,667
3.a.i	16.00	11.00	0.00	11.00	$	192,708	$	126,636
3.b.i	15.00	13.60	0.00	13.60	$	144,052	$	132,528
3.d.ii	13.00	10.67	0.00	10.67	$	155,622	$	104,859
3.g.ii	12.00	11.33	0.00	11.33	$	205,158	$	199,948
4.c.ii	16.00	16.00	0.00	16.00	$	104,437	$	104,437

Print Summary

Print All

AV Adjustments (Column F)

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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	

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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	12/31/2016	N/A	Completed	Pass & Complete	
	●	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	3/31/2017	N/A	Completed	Pass & Complete	1
	●	4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	6/30/2016	N/A	Completed	Pass & Complete	
	●	5. Develop training strategy	9/30/2016	N/A	Completed	Pass & Complete	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Additional Workforce Strategy Topic Areas	🔴	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	

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	

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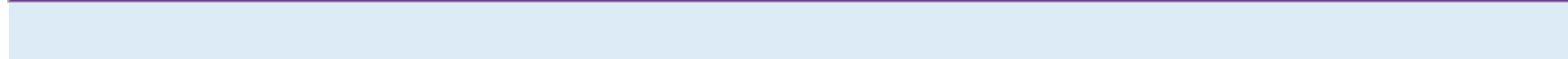
Section 02 - Governance							
Governance Structure Updates		1. Finalize governance structure and sub-committee structure	9/30/2015	N/A	Completed		
		2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed		
		3. Finalize bylaws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

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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	In Process	Pass & Ongoing	
	●	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	6/30/2016	N/A	Completed	Pass & Complete	N/A
	●	8. Finalize workforce communication and engagement plan	N/A	N/A	In Process	Pass & Ongoing	
	●	9. Inclusion of CBOs in PPS Implementation	12/31/2015	N/A	Completed	Pass & Complete	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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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	
						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 03 - Financial Sustainability					
	🟢	1. Finalize PPS finance structure, including reporting structure	9/30/2015	N/A	Completed

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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

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	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

Total	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	

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Additional Cultural Competency /Health Literacy Topic Areas	●	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 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.	N/A	N/A	In Process

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IT Systems and Processes	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	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.	6/30/2016	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	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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| | ● | 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.	6/30/2016	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.	6/30/2016	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	

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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.	3/31/2017	N/A	Completed	Pass & Complete	
		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.	12/31/2016	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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	●					
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
	●	Roles and Responsibilities	N/A	N/A	In Process	
Additional Practitioner Engagement Topic Areas	●	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.	9/30/2016	N/A	Complete	N/A

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Health	●	2. Finalize PPS-wide bed reduction plan.	12/31/2016	N/A	Complete	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'.	3/31/2016	N/A	Completed	Pass & Complete	N/A
	🔴	2. Develop a Clinical Integration strategy.	N/A	N/A	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

Save & Return

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Total		**0**

Save & Return

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AV Adjustment Scoresheet								
Adjustment	**AVs Per Project**	**Total Projects Selected**	**Total AVs Available**	**Total AVs Awarded**		**Adjusted AVs**	**Net AVs Awarded**	
				Net Awarded	**Percentage AV**		**Net Awarded**	**Percentage AV**
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%
Project Adjustments (applied to one project only)	Various	9.00	145.00	117.23	81%	0.00	117.23	81%
Total			**190.00**	**162.23**	**85%**	**0.00**	**162.23**	**85%**

Hide Reviewer Comments   ☐ Organizational   ☐ Project Adjustments

No AV Adjustments
●   *Please note that there are no AV adjustments for The New York Presbyterian Hospital of Queens in DY2, Q1*

●

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The New York Presbyterian Hospital of Queens - Project 2.a.ii

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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, Q4 Payment Available	$	286,759
DY3, Q4 Payment Earned	$	177,404

2.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%	27%	76,469	74,649
	Project Implementation Speed	Complete	1.00	0.83	83%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.83**	**98%**	**40%**	**27%**	**76,469**	**74,649**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	19,117	19,117
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.50	44%	50%	67%	191,173	83,638
	Domain 2 Subtotal		**23.00**	**18.50**	**80%**	**60%**	**73%**	**210,290**	**102,755**
	Total	**Complete**	**30.00**	**25.33**	**84%**	**100%**	**100%**	**286,759**	**177,404**

Total Project 2.a.ii AVs Awarded: 25.33 out of 30

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
	Enter Reviewer Comment					

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●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.83
	Enter Reviewer Comment					
●					Pass & Ongoing	1
	Enter Reviewer Comment					
	Total					**1.83**

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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17
	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					

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The New York Presbyterian Hospital of Queens - 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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17
	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	Pass & Complete	0.17
	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	0.17
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17
	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					
					Fail	0.00
●	*Enter Reviewer Comment*					

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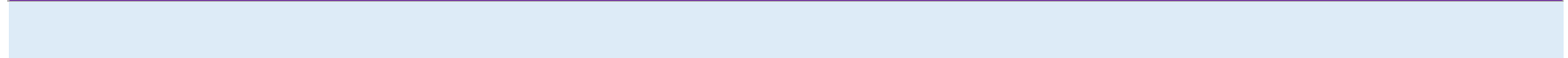**Delivery System Reform Incentive Payment (DSRIP) Program**

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

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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	1
Enter Reviewer Comment		
	Pass & Ongoing	

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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
			1
			0.5
			0.5

Domain 2 Pay for Performance   Project 2.a.ii

| | 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)
The New York Presbyterian Hospital of Queens - Project 2.a.ii

Save & Return		
Print		

Comment	Status	Value
Enter Reviewer Comment	Fail	0
Enter Reviewer Comment	Fail	0
Enter Reviewer Comment	Fail	0
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	Fail	0
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		
Total		**3.50**

NEW YORK STATE Department of Health | Medicaid Redesign Team

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.v
Project Title	Care transitions intervention for skilled nursing facility (SNF) residents

Payment Snapshot		
DY3, Q4 Payment Available	$	357,238
DY3, Q4 Payment Earned	$	223,273

2.b.v 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%	95,263	95,263
	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%**	**27%**	**95,263**	**95,263**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	23,816	23,816
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.50	44%	50%	67%	238,158	104,194
Domain 2 Subtotal			**23.00**	**18.50**	**80%**	**60%**	**73%**	**261,974**	**128,010**
Total		**Complete**	**29.00**	**24.50**	**84%**	**100%**	**100%**	**357,238**	**223,273**

Total Project 2.b.v AVs Awarded: 24.5 out of 29

Hide Reviewer Comments

Domain 1 Project Milestones Project 2.b.v						
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)
The New York Presbyterian Hospital of Queens - Project 2.b.v

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●	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
●					Pass & Ongoing	1
	Enter Reviewer Comment					
	Total					**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.v						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Partner with associated SNFs to develop a standardized protocol to assist with resolution of the identified issues.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	2. Engage with the Medicaid Managed Care Organizations and Managed Long Term Care or FIDA Plans associated with their identified population to develop transition of care protocols, ensure covered services including DME will be readily available, and that there is a payment strategy for the transition of care services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	3. Develop transition of care protocols that will include timely notification of planned discharges and the ability of the SNF staff to visit the patient and staff in the hospital to develop the transition of care services. Ensure that all relevant protocols allow patients in end-of-life situations to transition home with all appropriate services.	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)
The New York Presbyterian Hospital of Queens - Project 2.b.v

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●	4. Establish protocols for standardized care record transitions to the SNF staff and medical personnel.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	5. Ensure all participating hospitals and SNFs have shared EHR system capability and HIE/RHIO/SHIN-NY access for electronic transition of medical records by the end of DSRIP Year 3.	3/31/2017	3/31/2017	Completed		N/A
●						N/A

Domain 2 Pay for Reporting Project 2.b.v		
●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
●			0.3333333
●			0.3333333
	Enter Reviewer Comment		

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 2.b.v

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

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)
The New York Presbyterian Hospital of Queens - Project 2.b.v

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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		
		Pass & Ongoing	1
		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	

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

Domain 2 Pay for Performance Project 2.b.v			
AV Driving	**Measure**	**Reviewer Status**	**Avs Awarded**
		Fail	
⬤	*Enter Reviewer Comment*		
		Fail	
⬤	*Enter Reviewer Comment*		
		Fail	
⬤	*Enter Reviewer Comment*		
		Fail	
⬤	*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*		

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	H-CAHPS – Care Transition Metrics	Fail	0
	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		
	Total		**3.50**

Save & Return

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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	$	321,197
DY3, Q4 Payment Earned	$	200,748

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%	85,652	85,652
	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%**	**27%**	**85,652**	**85,652**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	21,413	21,413
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.50	44%	50%	67%	214,131	93,682
Domain 2 Subtotal			**23.00**	**18.50**	**80%**	**60%**	**73%**	**235,544**	**115,095**
Total		**Complete**	**29.00**	**24.50**	**84%**	**100%**	**100%**	**321,197**	**200,748**

Total Project 2.b.vii AVs Awarded: 24.5 out of 29

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	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
⬤					Pass & Ongoing	1
	Enter Reviewer Comment					
	Total					**1.00**

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.	3/31/2017	3/31/2017	Completed	Fail	N/A
	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 & Complete	N/A
	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
●						N/A
●						N/A
●						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
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 2.b.vii

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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
	Enter Reviewer Comment		
		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)
The New York Presbyterian Hospital of Queens - Project 2.b.vii

Save & Return

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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
	Pass & Ongoing	1
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)
The New York Presbyterian Hospital of Queens - Project 2.b.vii

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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

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)
The New York Presbyterian Hospital of Queens - Project 2.b.vii

Save & Return

Print

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		
	Fail	0
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		
Total		**3.50**

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)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

Save & Return

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.viii
Project Title	Hospital-Home Care Collaboration Solutions

Payment Snapshot		
DY3, Q4 Payment Available	$	334,748
DY3, Q4 Payment Earned	$	206,667

2.b.viii 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%	89,266	86,716
	Project Implementation Speed	Complete	1.00	0.80	80%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**7.00**	**6.80**	**97%**	**40%**	**27%**	**89,266**	**86,716**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	22,317	22,317
	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.50	44%	50%	67%	223,165	97,635

Total Project 2.b.viii AVs Awarded: 25.3 out of 30

Hide Reviewer Comments

Domain 1 Project Milestones   Project 2.b.viii

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)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

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	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.80
●	*Enter Reviewer Comment*					
					Pass & Ongoing	1
●	*Enter Reviewer Comment*					
	Total					**1.80**

Domain 1 Project Prescribed Milestones - Project 2.b.viii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20
	Enter Reviewer Comment					
●	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	3. Develop 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 & Ongoing	
	Enter Reviewer Comment					

New York State Department of Health
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

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●	4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	5. Develop 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	Pass & Ongoing	
	Enter Reviewer Comment					
●					Pass & Ongoing	
	Enter Reviewer Comment					
●	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A
	Enter Reviewer Comment					
●	8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management.	3/31/2018	3/31/2018	Completed	Fail	0.00
	Enter Reviewer Comment					
●					Pass & Complete	0.20
	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)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

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		0.20

Domain 2 Pay for Reporting Project 2.b.viii		

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
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●	Children's Access to Primary Care- 12 to 19 years	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		
		Pass & Ongoing	1
	Enter Reviewer Comment		

New York State Department of Health
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

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	Measure	Status	AV
●	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
●		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		

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 2.b.viii

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

Domain 2 Pay for Performance Project 2.b.viii			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
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		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
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●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Enter Reviewer Comment		
●		Fail	0
	Enter Reviewer Comment		
●		Fail	0
	Enter Reviewer Comment		
●		Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		**3.50**

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 3.a.i

Save & Return

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Payment Snapshot		
DY3, Q4 Payment Available	$	192,708
DY3, Q4 Payment Earned	$	126,636

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%	77,083	66,071
	Project Implementation Speed	Complete	1.00	0.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.00**	**86%**	**40%**	**40%**	**77,083**	**66,071**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	19,271	19,271
	Domain 3 Pay for Performance		7.00	3.00	43%	50%	50%	96,354	41,294
	Domain 3 Subtotal		**9.00**	**5.00**	**56%**	**60%**	**60%**	**115,625**	**60,565**
	Total	**Complete**	**16.00**	**11.00**	**69%**	**100%**	**100%**	**192,708**	**126,636**

Total Project 3.a.i AVs Awarded: 11 out of 16

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
	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)
The New York Presbyterian Hospital of Queens - Project 3.a.i

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●	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
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.			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)
The New York Presbyterian Hospital of Queens - Project 3.a.i

	●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed		N/A
							N/A
	●					*Enter Reviewer Comment*	
3.a.i Model 2	●	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
	●						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)
The New York Presbyterian Hospital of Queens - Project 3.a.i

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Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
		1

Domain 3 Pay for Performance		
Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
		0
		0
		0
		0
		0
		0
P4P Measure DY3, Q4		0.5

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 3.a.i

●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)		0.5
	P4P Measure DY3, Q4		
●		Pass & Ongoing	1
	P4P Measure DY3, Q4		
	Total		**3.00**

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - 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	$	144,052
DY3, Q4 Payment Earned	$	132,528

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%	57,621	46,097
	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%**	**40%**	**57,621**	**46,097**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	8.00	8.00	100%	10%	60%	86,431	86,431
	Domain 3 Pay for Performance (P4P)		0.00	0.00	N/A	50%	0%	-	-
	Domain 3 Subtotal		**8.00**	**8.00**	**100%**	**60%**	**60%**	**86,431**	**86,431**
Total		**Complete**	**15.00**	**13.60**	**91%**	**100%**	**100%**	**144,052**	**132,528**

Total Project 3.b.i AVs Awarded: 13.6 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					

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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 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 & Complete	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)
The New York Presbyterian Hospital of Queens - 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 & Complete	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 & Complete	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	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)
The New York Presbyterian Hospital of Queens - 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 & Complete	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 & Complete	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 & Complete	0.10
Enter Reviewer Comment					
18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	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	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)
The New York Presbyterian Hospital of Queens - Project 3.b.i

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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**

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

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 3.d.ii

Payment Snapshot		
DY3, Q4 Payment Available	$	155,622
DY3, Q4 Payment Earned	$	104,859

3.d.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%	62,249	50,392
	Project Implementation Speed	Complete	1.00	0.67	67%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal			**7.00**	**5.67**	**81%**	**40%**	**40%**	**62,249**	**50,392**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	15,562	15,562
	Domain 3 Pay for Performance (P4P)		2.00	1.00	50%	50%	50%	77,811	38,905
Domain 3 Subtotal			**6.00**	**5.00**	**83%**	**60%**	**60%**	**93,373**	**54,468**
Total		**Complete**	**13.00**	**10.67**	**82%**	**100%**	**100%**	**155,622**	**104,859**

Total Project 3.d.ii AVs Awarded: 10.67 out of 13

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

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●	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Ongoing	0.67
●					Fail	0
	Enter Reviewer Comment					
Total						**0.67**

Domain 1 Project Prescribed Milestones - Project 3.d.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.33
	Enter Reviewer Comment					
●	2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce exposure	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
					Fail	N/A
●	*Enter Reviewer Comment*					

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●	4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	5. Ensure coordinated care for asthma patients includes social services and support.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.33
	Enter Reviewer Comment					
●	6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2018	3/31/2018	Completed	Fail	0.00
	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					
	Total					**0.67**

Domain 3 Pay for Reporting			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**

New York State Department of Health
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 3.d.ii

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●	Asthma Medication Ratio (5 – 64 Years)		1
●			0.5
●			0.5
●			1
●			1

Domain 3 Pay for Performance

●	Asthma Medication Ratio (5 – 64 Years)		1
●			0
●			0

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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.g.ii
Project Title	Integration of Palliative Care into Nursing Homes

Payment Snapshot		
DY3, Q4 Payment Available	$	205,158
DY3, Q4 Payment Earned	$	199,948

3.g.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%	54,709	49,499
	Project Implementation Speed	Complete	1.00	0.33	33%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**7.00**	**6.33**	**90%**	**40%**	**27%**	**54,709**	**49,499**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	73%	150,450	150,450
	Domain 3 Pay for Performance (P4P)	N/A	N/A			50%	0%	-	-
	Domain 3 Subtotal		**5.00**	**5.00**	**100%**	**60%**	**73%**	**150,450**	**150,450**
Total		**Complete**	**12.00**	**11.33**	**94%**	**100%**	**100%**	**205,158**	**199,948**

Total Project 3.g.ii AVs Awarded: 11.33 out of 12

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Domain 1 Project Milestones Project 3.g.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)
The New York Presbyterian Hospital of Queens - Project 3.g.ii

●	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.33
	Enter Reviewer Comment				
●					Pass & Ongoing	1
	Enter Reviewer Comment				
	Total					**1.33**

Domain 1 Project Prescribed Milestones - Project 3.g.ii					
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.33333333
	Enter Reviewer Comment					
●	2. Contract or develop partnerships with community and provider resources, including Hospice, to bring the palliative care supports and services into the nursing home.	3/31/2018	3/31/2018	Completed	Fail	0
	Enter Reviewer Comment					
●	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
●	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
					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)
The New York Presbyterian Hospital of Queens - Project 3.g.ii

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	N/A

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.ii	
Percentage of members who remained stable or demonstrated improvement in pain	1
	1
	1
	1
	1

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)
The New York Presbyterian Hospital of Queens - Project 3.g.ii

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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)
The New York Presbyterian Hospital of Queens - Project 4.c.ii

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

Payment Snapshot		
DY3, Q4 Payment Available	$	104,437
DY3, Q4 Payment Earned	$	104,437

4.c.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%	41,775	41,775
	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%**	**41,775**	**41,775**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	60%	60%	62,662	62,662
	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%**	**62,662**	**62,662**
	Total	**Complete**	**16.00**	**16.00**	**100%**	**100%**	**100%**	**104,437**	**104,437**

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (all Milestones are P4R in 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
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
The New York Presbyterian Hospital of Queens - Project 4.c.ii

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