



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

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**Albany Medical Center Hospital (PPS ID:1)**

**Quarterly Report - Implementation Plan for Albany Medical Center Hospital**












Year and Quarter: DY2, Q4

Quarterly Report Status:  Adjudicated

**Status By Section**

| Section                    | Description                           | Status  |
|----------------------------|---------------------------------------|---|
| <a href="#">Section 01</a> | Budget                                |  Completed   |
| <a href="#">Section 02</a> | Governance                            |  Completed   |
| <a href="#">Section 03</a> | Financial Stability                   |  Completed   |
| <a href="#">Section 04</a> | Cultural Competency & Health Literacy |  Completed   |
| <a href="#">Section 05</a> | IT Systems and Processes              |  Completed   |
| <a href="#">Section 06</a> | Performance Reporting                 |  Completed   |
| <a href="#">Section 07</a> | Practitioner Engagement               |  Completed   |
| <a href="#">Section 08</a> | Population Health Management          |  Completed   |
| <a href="#">Section 09</a> | Clinical Integration                  |  Completed  |
| <a href="#">Section 10</a> | General Project Reporting             |  Completed |
| <a href="#">Section 11</a> | Workforce                             |  Completed |

**Status By Project**

| Project ID              | Project Title   | Status  |
|-------------------------|---|---|
| <a href="#">2.a.i</a>   | Create Integrated Delivery Systems that are focused on Evidence-Based Medicine / Population Health Management   |  Completed |
| <a href="#">2.a.iii</a> | Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services |  Completed |
| <a href="#">2.a.v</a>   | Create a medical village/alternative housing using existing nursing home infrastructure   |  Completed |
| <a href="#">2.b.iii</a> | ED care triage for at-risk populations  |  Completed |
| <a href="#">2.d.i</a>   | Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care                             |  Completed |
| <a href="#">3.a.i</a>   | Integration of primary care and behavioral health services  |  Completed |
| <a href="#">3.a.ii</a>  | Behavioral health community crisis stabilization services   |  Completed |
| <a href="#">3.b.i</a>   | Evidence-based strategies for disease management in high risk/affected populations (adult only)   |  Completed |
| <a href="#">3.d.iii</a> | Implementation of evidence-based medicine guidelines for asthma management  |  Completed |
| <a href="#">4.b.i</a>   | Promote tobacco use cessation, especially among low SES populations and those with poor mental health.  |  Completed |
| <a href="#">4.b.ii</a>  | Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic                                      |  Completed |



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**Status By Project**

| Project ID | Project Title  | Status |
|------------|--|--------|
|            | diseases that are not included in domain 3, such as cancer |        |

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**Albany Medical Center Hospital (PPS ID:1)**



**Section 01 – Budget**

IPQR Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY

**Instructions :**

READ ONLY - The Baseline Budget table was left for ease of reference during reporting.

| Budget Items   | DY1 (\$)          | DY2 (\$)          | DY3 (\$)          | DY4 (\$)          | DY5 (\$)          | Total (\$)         |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|--------------------|
| <b>Waiver Revenue</b>                                      | 21,215,367        | 22,608,608        | 36,560,957        | 32,374,588        | 21,215,367        | 133,974,888        |
| <b>Cost of Project Implementation &amp; Administration</b> | <b>9,549,730</b>  | <b>6,784,488</b>  | <b>9,137,087</b>  | <b>4,855,250</b>  | <b>1,697,730</b>  | <b>32,024,285</b>  |
| Cost of Project Implementation                             | 4,250,137         | 3,015,678         | 4,067,943         | 1,095,631         | 1,004,774         | 13,434,163         |
| Cost of Administration                                     | 5,299,593         | 3,768,810         | 5,069,144         | 3,759,619         | 692,956           | 18,590,122         |
| <b>Revenue Loss</b>  | <b>228,293</b>    | <b>4,749,142</b>  | <b>9,502,571</b>  | <b>8,415,767</b>  | <b>4,880,973</b>  | <b>27,776,746</b>  |
| <b>Internal PPS Provider Bonus Payments</b>                | <b>4,244,324</b>  | <b>5,653,740</b>  | <b>10,964,505</b> | <b>11,328,917</b> | <b>8,488,649</b>  | <b>40,680,135</b>  |
| <b>Cost of non-covered services</b>                        | <b>3,183,243</b>  | <b>3,392,244</b>  | <b>5,482,252</b>  | <b>4,855,250</b>  | <b>3,183,243</b>  | <b>20,096,232</b>  |
| <b>Other</b>   | <b>2,115,907</b>  | <b>2,255,143</b>  | <b>3,667,442</b>  | <b>3,243,088</b>  | <b>2,115,907</b>  | <b>13,397,487</b>  |
| Contingency  | 2,115,907         | 2,255,143         | 3,667,442         | 3,243,088         | 2,115,907         | 13,397,487         |
| <b>Total Expenditures</b>                                  | <b>19,321,497</b> | <b>22,834,757</b> | <b>38,753,857</b> | <b>32,698,272</b> | <b>20,366,502</b> | <b>133,974,885</b> |
| <b>Undistributed Revenue</b>                               | <b>1,893,870</b>  | <b>0</b>          | <b>0</b>          | <b>0</b>          | <b>848,865</b>    | <b>3</b>           |

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**Narrative Text :**

**Module Review Status**

| Review Status  | IA Formal Comments |
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| Pass & Ongoing |                    |





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 DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✓ IPQR Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)**

**Instructions :**

Please include updates on waiver revenue budget items for this quarterly reporting period. Reported actual spending will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

**Benchmarks**

| Waiver Revenue DY2 | Total Waiver Revenue | Undistributed Revenue YTD | Undistributed Revenue Total |
|--------------------|----------------------|---------------------------|-----------------------------|
| 22,608,608         | 133,974,888          | 10,801,573                | 119,102,666                 |

| Budget Items   | DY2 Q4 Quarterly Amount - Update | Cumulative Spending to Date (DY1 - DY5) | Remaining Balance in Current DY | Percent Remaining in Current DY | Cumulative Remaining Balance | Percent Remaining of Cumulative Balance |
|--|----------------------------------|---|---------------------------------|---------------------------------|------------------------------|---|
| <b>Cost of Project Implementation &amp; Administration</b> | 1,694,446                        | 8,074,961                               | 1,437,582                       | 21.19%                          | 23,949,324                   | 74.78%                                  |
| Cost of Project Implementation                             | 1,420,383                        |   |                                 |                                 |                              |   |
| Cost of Administration                                     | 274,063                          |   |                                 |                                 |                              |   |
| <b>Revenue Loss</b>  | 0                                | 0                                       | 4,749,142                       | 100.00%                         | 27,776,746                   | 100.00%                                 |
| <b>Internal PPS Provider Bonus Payments</b>                | 2,284,447                        | 6,410,173                               | -677,108                        | -11.98%                         | 34,269,962                   | 84.24%                                  |
| <b>Cost of non-covered services</b>                        | 0                                | 235,149                                 | 3,315,746                       | 97.74%                          | 19,861,083                   | 98.83%                                  |
| <b>Other</b>   | 0                                | 151,939                                 | 2,202,360                       | 97.66%                          | 13,245,548                   | 98.87%                                  |
| Contingency  | 0                                |   |                                 |                                 |                              |   |
| <b>Total Expenditures</b>                                  | 3,978,893                        | 14,872,222                              |                                 |                                 |                              |   |

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For PPS to provide additional context regarding progress and/or updates to IA.



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**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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**✔ IPQR Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY**

**Instructions :**

READ ONLY - The Baseline Funds Flow table was left for ease of reference during reporting.

| Funds Flow Items                               | DY1 (\$)          | DY2 (\$)          | DY3 (\$)          | DY4 (\$)          | DY5 (\$)          | Total (\$)         |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|--------------------|
| <b>Waiver Revenue</b>                          | 21,215,367        | 22,608,608        | 36,560,957        | 32,374,588        | 21,215,367        | 133,974,888        |
| Practitioner - Primary Care Provider (PCP)     | 2,828,146         | 2,695,323         | 4,373,658         | 3,630,404         | 2,322,630         | 15,850,161         |
| Practitioner - Non-Primary Care Provider (PCP) | 1,080,373         | 1,135,888         | 1,910,482         | 1,714,050         | 1,155,614         | 6,996,407          |
| Hospital                                       | 3,551,331         | 7,549,122         | 13,991,344        | 12,166,110        | 7,331,802         | 44,589,709         |
| Clinic   | 2,177,469         | 2,441,846         | 4,185,348         | 3,700,613         | 2,444,257         | 14,949,533         |
| Case Management / Health Home                  | 2,393,551         | 2,295,196         | 3,726,856         | 3,107,184         | 1,992,548         | 13,515,335         |
| Mental Health                                  | 1,910,273         | 1,869,964         | 3,062,329         | 2,599,840         | 1,689,116         | 11,131,522         |
| Substance Abuse                                | 1,543,718         | 1,489,622         | 2,397,813         | 1,996,612         | 1,272,400         | 8,700,165          |
| Nursing Home                                   | 628,291           | 610,034           | 969,093           | 803,646           | 506,722           | 3,517,786          |
| Pharmacy                                       | 58,649            | 60,855            | 106,322           | 96,516            | 66,674            | 389,016            |
| Hospice  | 0                 | 0                 | 0                 | 0                 | 0                 | 0                  |
| Community Based Organizations                  | 1,309,123         | 1,246,202         | 1,972,522         | 1,610,545         | 1,005,703         | 7,144,095          |
| All Other                                      | 0                 | 0                 | 0                 | 0                 | 0                 | 0                  |
| Uncategorized                                  |                   |                   |                   |                   |                   | 0                  |
| PPS PMO  | 1,846,829         | 1,447,058         | 2,045,484         | 1,266,495         | 585,293           | 7,191,159          |
| <b>Total Funds Distributed</b>                 | <b>19,327,753</b> | <b>22,841,110</b> | <b>38,741,251</b> | <b>32,692,015</b> | <b>20,372,759</b> | <b>133,974,888</b> |
| <b>Undistributed Revenue</b>                   | <b>1,887,614</b>  | <b>0</b>          | <b>0</b>          | <b>0</b>          | <b>842,608</b>    | <b>0</b>           |

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**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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**IPQR Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)**

**Instructions :**

Please include updates on waiver revenue flow of funds for this quarterly reporting period by importing the PIT file and filling out the PPS PMO line manually. Reported actual fund distribution will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

**Benchmarks**

| Waiver Revenue DY2 | Total Waiver Revenue | Undistributed Revenue YTD | Undistributed Revenue Total |
|--------------------|----------------------|---------------------------|-----------------------------|
| 22,608,608.00      | 133,974,888.00       | 10,519,765.87             | 118,810,737.91              |

| Funds Flow Items                               | DY2 Q4 Quarterly Amount - Update | Percentage of Safety Net Funds - DY2 Q4 Quarterly Amount - Update | Safety Net Funds Flowed YTD | Safety Net Funds Percentage YTD | Total Amount Disbursed to Date (DY1-DY5) | Percent Spent By Project   |   |   |   |   |   |   |   |   |   |  | DY Adjusted Difference | Cumulative Difference |
|--|----------------------------------|---|-----------------------------|---------------------------------|--|--|---|---|---|---|---|---|---|---|---|--|------------------------|-----------------------|
|  |                                  |   |                             |                                 |  | Projects Selected By PPS   |   |   |   |   |   |   |   |   |   |  |                        |                       |
|  |                                  |   |                             |                                 |  | 2.a.i  | 2.a.iii   | 2.a.v   | 2.b.iii   | 2.d.i   | 3.a.i   | 3.a.ii  | 3.b.i   | 3.d.iii   | 4.b.i   | 4.b.ii   |                        |                       |
| Practitioner - Primary Care Provider (PCP)     | 250,877                          | 100.00%   | 477,738                     | 100.00%                         | 483,738                                  | 15.04  | .79   | 0   | 9.94  | 7.5   | 18.6  | 9.04  | 2.61  | 23.01   | 10.85   | 2.61   | 2,217,585              | 15,366,423            |
| Practitioner - Non-Primary Care Provider (PCP) | 0                                | 0.00%   | 0                           | 0.00%                           | 0  | 0  | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0  | 1,135,888              | 6,996,407             |
| Hospital                                       | 666,245.68                       | 86.46%  | 1,632,899.21                | 53.94%                          | 3,075,158.68                             | 22.41  | 11.8  | 0   | 8.77  | 10.54   | 8.77  | 2.65  | 11.82   | 8.77  | 5.71  | 8.77   | 4,522,083.32           | 41,514,550.32         |
| Clinic   | 113,768                          | 92.78%  | 150,846                     | 84.80%                          | 189,885                                  | 13.08  | 11.29   | 0   | 1.04  | 6.75  | 7.25  | 0   | 28.39   | 18.23   | 4.34  | 9.64   | 2,263,961              | 14,759,648            |
| Case Management / Health Home                  | 113,598                          | 63.75%  | 74,896                      | 31.78%                          | 247,695                                  | 28.74  | 21.66   | 0   | 8.51  | 5.31  | 7.15  | 14.68   | 2.89  | 0   | 5.92  | 5.15   | 2,059,501              | 13,267,640            |
| Mental Health                                  | 75,123                           | 89.98%  | 316,138.50                  | 79.96%                          | 419,348.50                               | 25.42  | 17.56   | 0   | 6.91  | 7.19  | 7.06  | 11.64   | 2.32  | 0   | 9.61  | 12.28  | 1,474,615.50           | 10,712,173.50         |
| Substance Abuse                                | 13,489                           | 100.00%   | 33,962                      | 100.00%                         | 50,962                                   | 46.27  | 0   | 2.39  | 0   | 0   | 20.24   | 14.27   | 0   | 0   | 8.41  | 8.41   | 1,455,660              | 8,649,203             |
| Nursing Home                                   | 18,183                           | 75.44%  | 33,874                      | 74.59%                          | 50,414                                   | 82.43  | 0   | 10.86   | 3.35  | 0   | 0   | 0   | 3.35  | 0   | 0   | 0  | 564,620                | 3,467,372             |
| Pharmacy                                       | 0                                | 0.00%   | 0                           | 0.00%                           | 0  | 0  | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0  | 60,855                 | 389,016               |
| Hospice  | 0                                | 0.00%   | 0                           | 0.00%                           | 0  | 0  | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0  | 0                      | 0                     |
| Community Based Organizations                  | 25,637                           | 0.00%   | 0                           | 0.00%                           | 71,135                                   | 55.95  | 3.8   | 4.56  | 0   | 26.18   | 0   | 5.55  | 0   | 1.14  | 1.41  | 1.41   | 1,186,067              | 7,072,960             |
| All Other                                      | 978,455                          | 14.55%  | 540,537                     | 30.48%                          | 1,802,150                                | 1.1419<br>99999<br>99999<br>99999<br>99928<br>94572<br>64239<br>89981<br>4129E | 1.0259<br>99999<br>99999<br>99786<br>83717<br>92719<br>69944<br>2387E | 3.6699<br>99999<br>99999<br>99289<br>45726<br>42398<br>99814<br>1288E | 6.7900<br>00000<br>00000<br>00355<br>27136<br>78800<br>50092<br>9355E | 5.8899<br>99999<br>99999<br>96802<br>55768<br>90795<br>49163<br>5799E | 1.1669<br>99999<br>99999<br>99928<br>94572<br>64239<br>89981<br>4129E | 8.1999<br>99999<br>99999<br>95115<br>01869<br>16493<br>11222<br>136E- | 2.1100<br>99999<br>00000<br>01421<br>08547<br>15202<br>00371<br>7422E | 1.7620<br>00000<br>00000<br>00994<br>75983<br>00641<br>40260<br>2196E | 5.2199<br>99999<br>99999<br>97513<br>10042<br>48396<br>49349<br>451E0 | 5.5300<br>00000<br>00000<br>02486<br>89957<br>51603<br>50650 | 0                      | 0                     |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Funds Flow Items     | DY2 Q4 Quarterly Amount - Update | Percentage of Safety Net Funds - DY2 Q4 Quarterly Amount - Update | Safety Net Funds Flowed YTD | Safety Net Funds Percentage YTD | Total Amount Disbursed to Date (DY1-DY5) | Percent Spent By Project |         |       |         |       |       |        |       |         |       |         | DY Adjusted Difference | Cumulative Difference |   |
|----------------------|----------------------------------|---|-----------------------------|---------------------------------|--|--------------------------|---------|-------|---------|-------|-------|--------|-------|---------|-------|---------|------------------------|-----------------------|---|
|                      |                                  |   |                             |                                 |  | Projects Selected By PPS |         |       |         |       |       |        |       |         |       |         |                        |                       |   |
|                      |                                  |   |                             |                                 |  | 2.a.i                    | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii  |                        |                       |   |
|                      |                                  |   |                             |                                 |  | 01                       | 01      | 00    | 00      | 00    | 01    | 01     | 01    | 01      | 0     | 5489E00 |                        |                       |   |
| Uncategorized        | 25,733                           | 6.14%   | 6,005                       | 8.11%                           | 91,009                                   | 29.41                    | 4.88    | 0     | 2.84    | 26.13 | 3.05  | 1.01   | 1.86  | 1.17    | 11.29 | 18.35   | 0                      | 0                     |   |
| Additional Providers | 3,338                            | 0.00%   | 0                           | 1.13%                           | 55,305                                   |                          |         |       |         |       |       |        |       |         |       |         |                        |                       |   |
| PPS PMO              | 1,694,446.37                     | 100.00%   | 5,750,161.95                | 100.00%                         | 8,627,349.91                             |                          |         |       |         |       |       |        |       |         |       |         |                        | 0                     | 0 |
| <b>Total</b>         | <b>3,978,893.05</b>              | <b>73.84%</b>   | <b>9,017,057.66</b>         | <b>74.59%</b>                   | <b>15,164,150.09</b>                     |                          |         |       |         |       |       |        |       |         |       |         |                        |                       |   |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
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No Records Found

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



New York State Department Of Health  
Delivery System Reform Incentive Payment Project

DSRIP Implementation Plan Project

Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Waiver Quarterly Update Amount By Provider            |  |                   |
|---|--|-------------------|
| Provider Name   | Provider Category                              | DY2Q4             |
| <b>Practitioner - Primary Care Provider (PCP)</b>     |  | <b>250,877</b>    |
| Ditursi Mary Kathleen Williams                        | Practitioner - Primary Care Provider (PCP)     | 53,734            |
| Tomiak Henry P Jr Md                                  | Practitioner - Primary Care Provider (PCP)     | 158,718           |
| Paeglow Robert John Md                                | Practitioner - Primary Care Provider (PCP)     | 38,425            |
| <b>Practitioner - Non-Primary Care Provider (PCP)</b> |  | <b>0</b>          |
|   | Practitioner - Non-Primary Care Provider (PCP) | 0                 |
| <b>Hospital</b>                                       |  | <b>666,245.68</b> |
| Columbia Memorial Hospital                            | Hospital                                       | 576,060.21        |
| Saratoga Hospital                                     | Hospital                                       | 90,185.47         |
| <b>Clinic</b>   |  | <b>113,768</b>    |
| Planned Pthd Mohawk Hudson                            | Clinic   | 6,980             |
| Albany County Health Dept                             | Clinic   | 8,214             |
| Whitney M Young Health Center                         | Clinic   | 64,196            |
| Upper Hudson Planned Parent                           | Clinic   | 31,614            |
| Com Hlth Ctr Of Smh & Nlh Inc                         | Clinic   | 2,764             |
| <b>Case Management / Health Home</b>                  |  | <b>113,598</b>    |
| Transitional Svcs Assoc Inc                           | Case Management / Health Home                  | 26,868            |
| Albany County Mh                                      | Case Management / Health Home                  | 7,925             |
| Aids Council Of Neny Ai                               | Case Management / Health Home                  | 41,182            |
| Albany Cnty Dept/Child Y&F Mh                         | Case Management / Health Home                  | 6,779             |
| Mha Of Columbia-Greene Mh                             | Case Management / Health Home                  | 7,095             |
| Columbia Cty Mh Ctr Mh                                | Case Management / Health Home                  | 23,749            |
| <b>Mental Health</b>                                  |  | <b>75,123</b>     |
| Clearview Center Mh                                   | Mental Health                                  | 7,089             |
| P R O M E S A   | Mental Health                                  | 2,055             |
| Green County Mental Hlth Mh                           | Mental Health                                  | 4,161             |
| Ulster-Greene Arc                                     | Mental Health                                  | 769               |
| St Catherines Ctr/Child Fbt                           | Mental Health                                  | 3,563             |
| Philmont Hearth Inc                                   | Mental Health                                  | 2,130             |

\* Safety Net Providers in Green

| Waiver Quarterly Update Amount By Provider         |                               |                |
|--|-------------------------------|----------------|
| Provider Name                                      | Provider Category             | DY2Q4          |
| Parsons Child And Family Ctr                       | Mental Health                 | 32,043         |
| Capital District Psych Ctr                         | Mental Health                 | 3,365          |
| Rehabilitation Supp Svcs C                         | Mental Health                 | 19,948         |
| <b>Substance Abuse</b>                             |                               | <b>13,489</b>  |
| Addictions Care Ctr Of Albany                      | Substance Abuse               | 3,392          |
| Twin Cty Recovery Svcs Inc                         | Substance Abuse               | 4,985          |
| Senior Hope Counseling Inc                         | Substance Abuse               | 2,143          |
| Conifer Park                                       | Substance Abuse               | 2,969          |
| <b>Nursing Home</b>                                |                               | <b>18,183</b>  |
| Home For Aged Blind Adhc/Aadc                      | Nursing Home                  | 4,466          |
| Julie Blair Nrsg & Rehab Cntr                      | Nursing Home                  | 7,841          |
| Fulton Center Rehabilitation & Heal                | Nursing Home                  | 2,888          |
| Albany County Nursing Home                         | Nursing Home                  | 2,988          |
| <b>Pharmacy</b>                                    |                               | <b>0</b>       |
|  | Pharmacy                      | 0              |
| <b>Hospice</b>                                     |                               | <b>0</b>       |
|  | Hospice                       | 0              |
| <b>Community Based Organizations</b>               |                               | <b>25,637</b>  |
| Hudson Mohawk Area Health Education Center         | Community Based Organizations | 1,299          |
| Shelters Of Saratoga                               | Community Based Organizations | 2,288          |
| De Paul Housing Management                         | Community Based Organizations | 5,000          |
| Community Caregivers                               | Community Based Organizations | 1,387          |
| In Our Own Voices, Inc.                            | Community Based Organizations | 4,824          |
| Indepdent Living Center Of The Hudson Valley, Inc. | Community Based Organizations | 3,904          |
| Black Nurses Coalition, Inc.                       | Community Based Organizations | 500            |
| Healthy Capital District Initiative                | Community Based Organizations | 6,435          |
| <b>All Other</b>                                   |                               | <b>978,455</b> |
| Ens Hlth Care Mgmt Llc                             | All Other                     | 2,712          |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Waiver Quarterly Update Amount By Provider  |                   |               |
|---|-------------------|---------------|
| Provider Name                               | Provider Category | DY2Q4         |
| Cah Center For Disabled                     | All Other         | 67,191        |
| All Metro Home Care Services Of New         | All Other         | 1,299         |
| Shaker Pediatrics Pc C                      | All Other         | 3,648         |
| Catholic Charities Serena Icf               | All Other         | 68,991        |
| Visiting Nurse Association Of Alban         | All Other         | 4,521         |
| Columbia Co Arc Ics                         | All Other         | 6,203         |
| Community Care Physicians Pc                | All Other         | 707,604       |
| Capitalcare Medical Group Llc               | All Other         | 116,286       |
| <b>Uncategorized</b>                        |                   | <b>25,733</b> |
| Trinity Alliance Of The Capital Region      | Uncategorized     | 4,185         |
| Columbia County Department Of Health        | Uncategorized     | 1,988         |
| Columbia Co Community Health Care           | Uncategorized     | 2,020         |
| Wildwood Programs Inc                       | Uncategorized     | 1,581         |
| Greene County Public Health Nursing Service | Uncategorized     | 10,846        |
| Kee To Independent Growth, Inc.             | Uncategorized     | 3,013         |
| Hudson River Healthcare, Inc.               | Uncategorized     | 2,100         |





**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Waiver Quarterly Update Amount By Provider      |                      |  |              |
|---|----------------------|--|--------------|
| Provider Name                                   | Provider Category    | IA Provider Approval/Rejection Indicator | DY2Q4        |
| <b>Additional Providers</b>                     |                      |  | <b>3,338</b> |
| Ny Senior Statewide Senior Action Council, Inc. | Additional Providers | Approved                                 | 2,288        |
| Elizabeth Campisi                               | Additional Providers | Approved                                 | 1,050        |



**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

**✅ IPQR Module 1.5 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline target dates and work breakdown tasks with target dates for required milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Milestone #1</b><br>Complete funds flow budget and distribution plan and communicate with network  | Completed | Funds Flow Budget and Distribution Plan, signed off by your Finance Committee, including details of your approach to funds flow on a whole-PPS and project-by-project basis; evidence of involvement of provider network in developing funds flow methodology. | 04/01/2015          | 12/31/2015        | 04/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. AMCH PPS Board will appoint a finance committee including financially competent representation from a cross section of the PPS.   | Completed | 1. AMCH PPS Board will appoint a finance committee including financially competent representation from a cross section of the PPS.   | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |
| <b>Task</b><br>2. The finance committee will review the budget developed during the planning stages to ensure DY1 budget is appropriate for the needs of the provider network.  | Completed | 2. The finance committee will review the budget developed during the planning stages to ensure DY1 budget is appropriate for the needs of the provider network.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>3. The finance committee will develop a set of Guiding Principles that will govern the funds flow, budget, and distribution plan. These guiding principles will be approved by the PAC Executive Committee, and the AMC PPS Board. | Completed | 3. The finance committee will develop a set of Guiding Principles that will govern the funds flow, budget, and distribution plan. These guiding principles will be approved by the PAC Executive Committee, and the AMC PPS Board.                             | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>4. The PMO will develop a timeline to guide the work of the Finance Committee.   | Completed | 4. The PMO will develop a timeline to guide the work of the Finance Committee.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>5. Consistent with the timeline and the guiding principles approved by the PPS Board, the finance committee will develop project specific funds flow models prior to the distribution of   | Completed | 5. Consistent with the timeline and the guiding principles approved by the PPS Board, the finance committee will develop project specific funds flow models prior to the distribution of funds to the PPS Providers.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| funds to the PPS Providers.  |           |   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>6. The PPS Board will approve each project specific funds flow model, as well as plans for the budgeted cost of services determined to be centralized either through the PPS PMO or specific vendors such as IT Solutions with broad application across multiple projects and throughout the PPS. | Completed | 6. The PPS Board will approve each project specific funds flow model, as well as plans for the budgeted cost of services determined to be centralized either through the PPS PMO or specific vendors such as IT Solutions with broad application across multiple projects and throughout the PPS. | 09/01/2015          | 12/30/2015        | 09/01/2015 | 12/30/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>7. The Finance Committee will review and update the budget at least quarterly and as needed.  | Completed | 7. The Finance Committee will review and update the budget at least quarterly and as needed.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>8. The PPS PMO will communicate the funds flow budget and distribution plan as well as any changes to the budget and plan to the PPS at the monthly PPS meetings and through other means.   | Completed | 8. The PPS PMO will communicate the funds flow budget and distribution plan as well as any changes to the budget and plan to the PPS at the monthly PPS meetings and through other means.   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Complete funds flow budget and distribution plan and communicate with network |                |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Milestone Review Status**

| <b>Milestone #</b>  | <b>Review Status</b> | <b>IA Formal Comments</b> |
|---------------------|----------------------|---------------------------|
| <b>Milestone #1</b> | Pass & Complete      |                           |



**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 1.6 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
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No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



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 Delivery System Reform Incentive Payment Project  
 DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)**

**Instructions :**

This table contains five budget categories for non-waiver revenue baseline budget reporting . Please add rows to this table as necessary in order to identify sub-categories.

| Budget Items   | DY1 (\$) | DY2 (\$) | DY3 (\$) | DY4 (\$) | DY5 (\$) | Total (\$) |
|--|----------|----------|----------|----------|----------|------------|
| <b>Non-Waiver Revenue</b>                                  | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Cost of Project Implementation &amp; Administration</b> | 0        | 0        | 0        | 0        | 0        | 0          |
| Administration   | 0        | 0        | 0        | 0        | 0        | 0          |
| Implementation   | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Revenue Loss</b>  | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Internal PPS Provider Bonus Payments</b>                | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Cost of non-covered services</b>                        | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Other</b>   | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Total Expenditures</b>                                  | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Undistributed Revenue</b>                               | 0        | 0        | 0        | 0        | 0        | 0          |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
|---------|-----------|-----------|------------------|-------------|
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No Records Found

**Narrative Text :**

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



**New York State Department Of Health  
 Delivery System Reform Incentive Payment Project  
 DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)**

**Instructions :**

Please include updates on non-waiver revenue budget items for this quarterly reporting period. Reported actual spending will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

**Benchmarks**

| Non-Waiver Revenue DY2 | Total Non-Waiver Revenue | Undistributed Non-Waiver Revenue YTD | Undistributed Non-Waiver Revenue Total |
|------------------------|--------------------------|--------------------------------------|--|
| 0                      | 0                        | 0                                    | 0                                      |

| Budget Items   | DY2 Q4 Quarterly Amount - Update | Cumulative Spending to Date (DY1 - DY5) | Remaining Balance in Current DY | Percent Remaining in Current DY | Cumulative Remaining Balance | Percent Remaining of Cumulative Balance |
|--|----------------------------------|---|---------------------------------|---------------------------------|------------------------------|---|
| <b>Cost of Project Implementation &amp; Administration</b> | 0                                | 0                                       | 0                               |                                 | 0                            |   |
| Administration   | 0                                |   |                                 |                                 |                              |   |
| Implementation   | 0                                |   |                                 |                                 |                              |   |
| <b>Revenue Loss</b>  | 0                                | 0                                       | 0                               |                                 | 0                            |   |
| <b>Internal PPS Provider Bonus Payments</b>                | 0                                | 0                                       | 0                               |                                 | 0                            |   |
| <b>Cost of non-covered services</b>                        | 0                                | 0                                       | 0                               |                                 | 0                            |   |
| <b>Other</b>   | 0                                | 0                                       | 0                               |                                 | 0                            |   |
| <b>Total Expenditures</b>                                  | 0                                | 0                                       |                                 |                                 |                              |   |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
|---------|-----------|-----------|------------------|-------------|
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**Narrative Text :**



**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

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**Module Review Status**

| <b>Review Status</b> | <b>IA Formal Comments</b> |
|----------------------|---------------------------|
| Pass & Ongoing       |                           |





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**✔ IPQR Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)**

**Instructions :**

In the table below, please detail your PPS's projected flow of non-waiver funds by provider type.

| Funds Flow Items                               | DY1 (\$) | DY2 (\$) | DY3 (\$) | DY4 (\$) | DY5 (\$) | Total (\$) |
|--|----------|----------|----------|----------|----------|------------|
| <b>Non-Waiver Revenue</b>                      | 0        | 0        | 0        | 0        | 0        | 0          |
| Practitioner - Primary Care Provider (PCP)     | 0        | 0        | 0        | 0        | 0        | 0          |
| Practitioner - Non-Primary Care Provider (PCP) | 0        | 0        | 0        | 0        | 0        | 0          |
| Hospital                                       | 0        | 0        | 0        | 0        | 0        | 0          |
| Clinic   | 0        | 0        | 0        | 0        | 0        | 0          |
| Case Management / Health Home                  | 0        | 0        | 0        | 0        | 0        | 0          |
| Mental Health                                  | 0        | 0        | 0        | 0        | 0        | 0          |
| Substance Abuse                                | 0        | 0        | 0        | 0        | 0        | 0          |
| Nursing Home                                   | 0        | 0        | 0        | 0        | 0        | 0          |
| Pharmacy                                       | 0        | 0        | 0        | 0        | 0        | 0          |
| Hospice  | 0        | 0        | 0        | 0        | 0        | 0          |
| Community Based Organizations                  | 0        | 0        | 0        | 0        | 0        | 0          |
| All Other                                      | 0        | 0        | 0        | 0        | 0        | 0          |
| Uncategorized                                  | 0        | 0        | 0        | 0        | 0        | 0          |
| PPS PMO  | 0        | 0        | 0        | 0        | 0        | 0          |
| <b>Total Funds Distributed</b>                 | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b>   |
| <b>Undistributed Non-Waiver Revenue</b>        | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b>   |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
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No Records Found

**Narrative Text :**



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**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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**✔ IPQR Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)**

**Instructions :**

Please include updates on flow of funds for this quarterly reporting period by importing the PIT file and filling out the PPS PMO line manually. Reported actual fund distribution will be compared to baseline projections and deviations will be evaluated.

Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

**Benchmarks**

| <b>Non-Waiver Revenue DY2</b> | <b>Total Non-Waiver Revenue</b> | <b>Undistributed Non-Waiver Revenue YTD</b> | <b>Undistributed Non-Waiver Revenue Total</b> |
|-------------------------------|---------------------------------|---|---|
| 0.00                          | 0.00                            | 0.00  | 0.00  |

| <b>Funds Flow Items</b>                        | <b>DY2 Q4 Quarterly Amount - Update</b> | <b>Percentage of Safety Net Funds - DY2 Q4 Quarterly Amount - Update</b> | <b>Safety Net Funds Flowed YTD</b> | <b>Safety Net Funds Percentage YTD</b> | <b>Total Amount Disbursed to Date (DY1-DY5)</b> | <b>DY Adjusted Difference</b> | <b>Cumulative Difference</b> |
|--|---|--|------------------------------------|--|---|-------------------------------|------------------------------|
| Practitioner - Primary Care Provider (PCP)     | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Practitioner - Non-Primary Care Provider (PCP) | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Hospital                                       | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Clinic   | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Case Management / Health Home                  | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Mental Health                                  | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Substance Abuse                                | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Nursing Home                                   | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Pharmacy                                       | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Hospice  | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Community Based Organizations                  | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| All Other                                      | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Uncategorized                                  | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   | 0                             | 0                            |
| Additional Providers                           | 0                                       | 0.00%  | 0                                  | 0.00%                                  | 0   |                               |                              |

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| Funds Flow Items | DY2 Q4 Quarterly Amount - Update | Percentage of Safety Net Funds - DY2 Q4 Quarterly Amount - Update | Safety Net Funds Flowed YTD | Safety Net Funds Percentage YTD | Total Amount Disbursed to Date (DY1-DY5) | DY Adjusted Difference | Cumulative Difference |
|------------------|----------------------------------|---|-----------------------------|---------------------------------|--|------------------------|-----------------------|
| PPS PMO          | 0                                | 0.00%   | 0                           | 0.00%                           | 0  | 0                      | 0                     |
| <b>Total</b>     | <b>0</b>                         |   | <b>0</b>                    |                                 | <b>0</b>                                 |                        |                       |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
|---------|-----------|-----------|------------------|-------------|
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No Records Found

**Narrative Text :**

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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\* Safety Net Providers in Green

| Non-Waiver Quarterly Update Amount By Provider        |  |          |
|---|--|----------|
| Provider Name   | Provider Category                              | DY2Q4    |
| <b>Practitioner - Primary Care Provider (PCP)</b>     |  | <b>0</b> |
|   | Practitioner - Primary Care Provider (PCP)     | 0        |
| <b>Practitioner - Non-Primary Care Provider (PCP)</b> |  | <b>0</b> |
|   | Practitioner - Non-Primary Care Provider (PCP) | 0        |
| <b>Hospital</b>                                       |  | <b>0</b> |
|   | Hospital                                       | 0        |
| <b>Clinic</b>   |  | <b>0</b> |
|   | Clinic   | 0        |
| <b>Case Management / Health Home</b>                  |  | <b>0</b> |
|   | Case Management / Health Home                  | 0        |
| <b>Mental Health</b>                                  |  | <b>0</b> |
|   | Mental Health                                  | 0        |
| <b>Substance Abuse</b>                                |  | <b>0</b> |
|   | Substance Abuse                                | 0        |
| <b>Nursing Home</b>                                   |  | <b>0</b> |
|   | Nursing Home                                   | 0        |
| <b>Pharmacy</b>                                       |  | <b>0</b> |
|   | Pharmacy                                       | 0        |
| <b>Hospice</b>  |  | <b>0</b> |
|   | Hospice  | 0        |
| <b>Community Based Organizations</b>                  |  | <b>0</b> |
|   | Community Based Organizations                  | 0        |
| <b>All Other</b>                                      |  | <b>0</b> |
|   | All Other                                      | 0        |
| <b>Uncategorized</b>                                  |  | <b>0</b> |
|   | Uncategorized                                  | 0        |



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\* Safety Net Providers in Green

| Non-Waiver Quarterly Update Amount By Provider |                      |  |       |
|--|----------------------|--|-------|
| Provider Name                                  | Provider Category    | IA Provider Approval/Rejection Indicator | DY2Q4 |
| Additional Providers                           |                      |  | 0     |
|  | Additional Providers |  | 0     |



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**IPQR Module 1.11 - IA Monitoring**

**Instructions :**



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**Section 02 – Governance**

**✅ IPQR Module 2.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Milestone #1</b><br>Finalize governance structure and sub-committee structure  | Completed | This milestone must be completed by 9/30/2015. Governance and committee structure, signed off by PPS Board.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           | YES |
| <b>Task</b><br>1. The AMCH Board of Governors (AMCH Board), as the Board of the PPS Lead, will approve the members of the AMCH Executive Steering Committee (PPS Board), which will report to the AMCH Board. The PPS Board will approve the charters for the standing committees for the AMCH PPS. The PAC Executive Committee will approve the PAC's operating guidelines and principles. | Completed | 1. The AMCH Board of Governors (AMCH Board), as the Board of the PPS Lead, will approve the members of the AMCH Executive Steering Committee (PPS Board), which will report to the AMCH Board. The PPS Board will approve the charters for the standing committees for the AMCH PPS. The PAC Executive Committee will approve the PAC's operating guidelines and principles.<br><br>The Collaborative Contracting model is currently in place where each partner participating in the PPS will have a contract with the AMCH PPS stipulating the roles and responsibilities. As the Lead Entity, AMCH retains ultimate decision making authority and is the contract partner for the State and the partners represented in the PAC. Thus, governance is coordinated and carried out through the joint efforts of AMCH and the PAC through a clearly defined committee structure.<br><br>The PPS may evolve to a Delegated Model where the partners join together and delegate key responsibilities for PPS Governance to a newly created legal entity (NewCo) where the governing structure of Newco would directly oversee all aspects of Finance, Clinical, IT, and compliance governance with accountability to an Executive Governance Body representative of the partners. (If the PPS evolves to a | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |





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| Milestone/Task Name  | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
|  |           | Delegated Model and there is a later-formed Newco, the governing body of Newco will assume responsibility for implementation of these identified steps outlined by AMCH in this implementation plan.)  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>2. AMCH will ensure adequacy of regional and key stakeholder participation.                                     | Completed | 2. AMCH will ensure adequacy of regional and key stakeholder participation and will create a list of nominees to serve as elected members of the PAC's Executive Committee.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>3. Election of members of PAC Executive Committee.  | Completed | 3. With the approval of the PPS Board and the voting members of the PAC, the PAC will elect members to the PAC Executive Committee in a manner that reflects a balance of the types of providers and geographic regions in the PPS. The PAC Executive Committee will elect its own chair who will provide leadership and help coordinate the activities of the committee.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>4. Establishment of subcommittees.  | Completed | 4. The PAC Executive Committee will seek representation of a diverse group of participating providers, with necessary expertise for the AMCH PPS committees that will oversee PPS activities. The following Committees will be established; Clinical and Quality Affairs, Finance, Audit and Compliance, Technology and Data Management, Consumer and Community Affairs, Cultural Competency and Health Literacy and the Workforce Coordinating Council. The Chair of each of the committees also serves on the PAC Executive Committee as a non-voting member. The PPS Board will approve the charters and members for each Committee, based on recommendations of the PAC Executive Committee. | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Milestone #2</b><br>Establish a clinical governance structure, including clinical quality committees for each DSRIP project | Completed | This milestone must be completed by 12/31/2015. Clinical Quality Committee charter and committee structure chart   | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>2. The Clinical and Quality Affairs Committee may elect to create sub-committees for the projects selected.     | Completed | 2. The Clinical and Quality Affairs Committee may elect to create sub-committees for the projects selected. Since there are interdependencies between projects, the Committee may elect to manage all of the projects as a single committee with support from AMCH's Project Management Office (PMO). The  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
|  |           | PMO will also play an important role in managing and integrating clinical and quality issues in support of the mission of this committee. The Clinical and Quality Affairs Committee will be populated by licensed medical personnel and other individuals with expertise in data analytics and quality improvement, representatives of the geographic area served and the participating providers, and will have oversight responsibility for provider engagement, clinical protocol development, identification or development of quality metrics and performance incentives and standards, initial assessment of quality performance by PPS providers and the PPS, including review of RCE data, quality management and reporting, and related clinical activities. Its membership will include clinicians participating in the PPS's selected projects. It will report its findings and recommendations for adoption of quality metrics, performance incentives and standards and quality reporting to the PPS Board. |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>3. The Clinical and Quality Affairs Committee will develop detailed work plans for each project by identifying action steps needed, resources required and timelines for completion, etc.   | Completed | 3. The Clinical and Quality Affairs Committee will develop detailed work plans for each project by identifying action steps needed, resources required and timelines for completion, etc. Particular emphasis will be placed on operational and/or procedural changes required at clinical sites to integrate care management protocols, data collection, and quality improvement using PDSA cycles. Work plans will be provided to the PPS Board for review and approval.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>4. Working with our PPS partner organizations and potentially also in collaboration with other neighboring PPSs, the Clinical and Quality Affairs Committee will identify or develop best practice guidelines and evidence-based protocols for all projects, where necessary and appropriate and recommend such protocols and guidelines to the PPS Board for adoption. | Completed | 4. Working with our PPS partner organizations and potentially also in collaboration with other neighboring PPSs, the Clinical and Quality Affairs Committee will identify or develop best practice guidelines and evidence-based protocols for all projects, where necessary and appropriate and recommend such protocols and guidelines to the PPS Board for adoption. The Clinical and Quality Affairs Committee will work closely with the governing boards and medical staff of the PPS partner organizations to encourage and facilitate the adoption of these PPS guidelines and protocols by participating provider organizations.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |



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| Milestone/Task Name  | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Task</b><br>5. With the support of the PMO, the Chair of the Clinical and Quality Affairs Committee will develop the charge for any sub-committees and a calendar of meetings of the committees as warranted.   | Completed | 5. With the support of the PMO, the Chair of the Clinical and Quality Affairs Committee will develop the charge for any sub-committees and a calendar of meetings of the committees as warranted. Meetings will be based on a frequency needed to accomplish the work plan and goals of the committee and will allow for both web-based and face-to-face participation.  | 09/01/2015          | 09/30/2015        | 09/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>6. The Clinical and Quality Affairs Committee, in collaboration with the PAC Executive Committee and the other 6 committees as necessary, will develop and implement methods to capture baseline information as well as on-going data to support metric evaluation and milestone reporting for each project over the duration of DSRIP. | Completed | 6. The Clinical and Quality Affairs Committee, in collaboration with the PAC Executive Committee and the other 6 committees as necessary, will develop and implement methods to capture baseline information as well as on-going data to support metric evaluation and milestone reporting for each project over the duration of DSRIP. The Clinical and Quality Affairs Committee will develop dashboards of quality data for purposes of governance oversight and reporting to the PPS and AMCH Board. | 09/01/2015          | 09/30/2015        | 09/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>7. Draft workplans and best practice guidelines for each subcommittee will be finalized and approved by the CQAC.   | On Hold   | 7. Draft workplans and best practice guidelines for each subcommittee will be finalized and approved by the CQAC.  | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |     |
| <b>Task</b><br>1. The PAC will adopt a detailed charge for the Clinical and Quality Affairs Committee.   | Completed | 1. The PAC will adopt a detailed charge for the Clinical and Quality Affairs Committee, which will be submitted for review and approval to the full PAC membership and the PPS Board.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Milestone #3</b><br>Finalize bylaws and policies or Committee Guidelines where applicable   | Completed | This milestone must be completed by 9/30/2015. Upload of bylaws and policies document or committee guidelines.   | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           | YES |
| <b>Task</b><br>1. The PAC's Charter and operating policies and procedures (PAC Governing Documents) required to efficiently organize and operate the PAC with a clearly defined governance structure will be finalized by the PAC Executive Committee and approved by the PPS Board.   | Completed | 1. The PAC's Charter and operating policies and procedures (PAC Governing Documents) required to efficiently organize and operate the PAC with a clearly defined governance structure will be finalized by the PAC Executive Committee and approved by the PPS Board.  | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |
| <b>Task</b><br>2. Following PPS Board approval of the governance structure, committee charters for PPS Committees and the PAC Governance Documents, the PAC Executive Committee will adopt policies and procedures needed to effectively manage, through a shared governance structure, the activities of the  | Completed | 2. Following PPS Board approval of the governance structure, committee charters for PPS Committees and the PAC Governance Documents, the PAC Executive Committee will adopt policies and procedures needed to effectively manage, through a shared governance structure, the activities of the   | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| adopt policies and procedures needed to effectively manage, through a shared governance structure.  |           | participating provider network, including financial management, compliance, data collection, reporting and analysis and other activities required in the implementation plan. Policies and procedures relating to financial management, compliance, data reporting and collection and other key areas of implementation will be submitted for review and approval to the respective governance committee and the PPS Board.  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>3. The PAC Executive Committee will develop dispute resolution procedures.   | Completed | 3. The PAC Executive Committee will develop dispute resolution procedures that will be reviewed and approved by the PPS Board.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>4. The PAC will adopt policies and procedures to address non-or under-performing partner organizations, which will be approved by the PPS Board. | Completed | 4. The PAC will adopt policies and procedures to address non-or under-performing partner organizations, which will be approved by the PPS Board. Contracts with PPS participating partners and project protocols will clearly articulate expectations of participation in the PPS and obligations in all critical areas, as well as consequences associated with under- or non-performance, per the scope of services and required elements of participation in the PPS.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>5. The Audit and Compliance Committee will adopt a Code of Conduct and Compliance Plan and policies (Compliance Documents).                      | Completed | 5. The Audit and Compliance Committee will adopt a Code of Conduct and Compliance Plan and policies (Compliance Documents) that will incorporate the required elements of a compliance program in accordance with NYS Social Services Law Section 363-d, and will require all PPS partner organizations and individual participating providers to adhere to the requirements of the PPS Compliance Program. The Compliance Documents will be submitted to the PPS Board and the AMCH Board of Governors for review and approval. | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Milestone #4</b><br>Establish governance structure reporting and monitoring processes  | Completed | This milestone must be completed by 12/31/2015. Governance and committee structure document, including description of two-way reporting processes and governance monitoring processes.   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. The PAC Executive Committee will generate data reporting templates to the PAC for two-way feedback and monitoring processes with              | Completed | 1. The PAC Executive Committee will generate data reporting templates to the PAC for two-way feedback and monitoring processes with reporting of all data regarding PPS and partner organization performance to the respective   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |



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| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| reporting of all data regarding PPS and partner organization performance to the respective governance committee and to the PPS Board.   |           | governance committee and to the PPS Board.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>2. The PAC Executive Committee, in consultation with other PAC Committees, as necessary, and with assistance from the PMO, will develop dashboard reporting for each project. Dashboards will be used for improvement and accountability to communicate information to PPS providers, CBOs, and to governance. | Completed | 2. The PAC Executive Committee, in consultation with other PAC Committees, as necessary, and with assistance from the PMO, will develop dashboard reporting for each project. Dashboards will be used for improvement and accountability to communicate information to PPS providers, CBOs, and to governance.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. The dashboard reports will use key project metrics to assess work-stream progress consistent with the details in this implementation plan. These metrics will include clinical, financial, human resource, information management, training and other essential variables of performance.                   | Completed | 3. The dashboard reports will use key project metrics to assess work-stream progress consistent with the details in this implementation plan. These metrics will include clinical, financial, human resource, information management, training and other essential variables of performance.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. AMCH will develop tools for collecting and reporting data from all participating providers.   | Completed | 4. AMCH will develop tools for collecting and reporting data from all participating providers.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>5. AMCH will require all participating providers including CBOs to use the tools developed for collecting and reporting data.  | Completed | 5. AMCH will require all participating providers including CBOs to use the tools developed for collecting and reporting data.   | 12/15/2015          | 12/31/2015        | 12/15/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Milestone #5</b><br>Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)  | Completed | Community engagement plan, including plans for two-way communication with stakeholders.   | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           | NO |
| <b>Task</b><br>1. AMCH PPS PMO will utilize the Community Needs Assessment (CNA) and other sources, to identify hot spot areas across the 5 county service area to be included in the Community Engagement Plan (CEP). This plan will require the   | Completed | 1. AMCH PPS PMO will utilize the Community Needs Assessment (CNA) and other sources, to identify hot spot areas across the 5 county service area to be included in the Community Engagement Plan (CEP). This plan will require the PMO to conduct specific community engagement activities such as health forums, focus groups and other health related | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| PMO to conduct specific community engagement activities such as health forums, focus groups and other health related community events as may be necessary.   |           | community events as may be necessary.   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>2. AMCH PPS PMO will collaborate with the Consumer and Community Affairs Committee (CCAC) and public and non-provider organizations to identify high visibility locations where community engagement activities would be beneficial. A master calendar will be developed each quarter identifying various engagement activities. This calendar will be made available to the PAC and the public through AMCH's web portal in subsequent quarters. | Completed | 2. AMCH PPS PMO will collaborate with the Consumer and Community Affairs Committee (CCAC) and public and non-provider organizations to identify high visibility locations where community engagement activities would be beneficial. A master calendar will be developed each quarter identifying various engagement activities. This calendar will be made available to the PAC and the public through AMCH's web portal in subsequent quarters. | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>3. As part of the Community Engagement Plan (CEP), the AMCH PPS PMO will develop a communication plan utilizing print, electronic, and voice modalities to enhance collaboration and communication among and between public and non-provider organizations and other stakeholders to establish open and transparent two-way communication.  | Completed | 3. As part of the Community Engagement Plan (CEP), the AMCH PPS PMO will develop a communication plan utilizing print, electronic, and voice modalities to enhance collaboration and communication among and between public and non-provider organizations and other stakeholders to establish open and transparent two-way communication.  | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>4. Under the direction of the CCAC, actively participate in COReSTAT and other community revitalization efforts to communicate what the PPS is doing and coordinate ongoing outreach activities to encourage participation.   | Completed | 4. Under the direction of the CCAC, actively participate in COReSTAT and other community revitalization efforts to communicate what the PPS is doing and coordinate ongoing outreach activities to encourage participation.   | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>5. Under the direction of the CCAC, continue to recruit and engage consumer and community participation in activities consistent with the approved community engagement plan.   | Completed | 5. Under the direction of the CCAC, continue to recruit and engage consumer and community participation in activities consistent with the approved community engagement plan.   | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b>  | Completed | 6. AMCH PPS PMO will present the CEP to the PAC   | 09/01/2015          | 09/30/2015        | 09/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| 6. AMCH PPS PMO will present the CEP to the PAC Executive Committee for final approval.  |           | Executive Committee for final approval.   |                     |                   |            |            |                  |                                  |    |
| <b>Milestone #6</b><br>Finalize partnership agreements or contracts with CBOs  | Completed | Signed CBO partnership agreements or contracts.   | 07/01/2015          | 12/31/2016        | 07/01/2015 | 12/31/2016 | 12/31/2016       | DY2 Q3                           | NO |
| <b>Task</b><br>1. Develop and execute partnership agreements with key CBOs in strategic locations throughout the 5 county service area.  | Completed | 1. Under the direction of the Consumer and Community Affairs Committee, develop and execute, partnership agreements with key CBOs in strategic locations throughout the 5 county service area.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. Continue targeted outreach to strategic CBO partners to encourage active engagement and participation in the committees of the PAC.  | Completed | 2. Under the direction of the Consumer and Community Affairs Committee, continue targeted outreach to strategic CBO partners to encourage active engagement and participation in the committees of the PAC.   | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Milestone #7</b><br>Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.)  | Completed | Agency Coordination Plan.   | 11/01/2015          | 06/30/2016        | 11/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. The PMO will develop an agency coordination plan in collaboration with the CCAC, WCC, and CQAC. This plan will identify explicit ways that State and Local Public Sector agencies will be engaged in the activities of DSRIP as it continues to evolve. The coordination plan will be presented to the PAC Executive Committee for approval. | Completed | 1. The PMO will develop an agency coordination plan in collaboration with the CCAC, WCC, and CQAC. This plan will identify explicit ways that State and Local Public Sector agencies will be engaged in the activities of DSRIP as it continues to evolve. The coordination plan will be presented to the PAC Executive Committee for approval. | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. Consistent with the approved coordination plan, the PMO will recruit participants from the various public sector agencies in coordination with municipal authorities, CORESTAT and SHIP.   | Completed | 2. Consistent with the approved coordination plan, the PMO will recruit participants from the various public sector agencies in coordination with municipal authorities, CORESTAT and SHIP.   | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>3. The PAC Executive Committee will develop an action plan for coordinating public sector agency  | Completed | 3. The PAC Executive Committee will develop an action plan for coordinating public sector agency activities with the detailed coordination plan of the PPS for discussion, review,  | 05/01/2016          | 06/30/2016        | 05/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| activities with the detailed coordination plan of the PPS for discussion, review, and adoption by the Agencies and Municipal Authorities, as necessary and appropriate. Meetings and communication will be documented as evidence of involvement and active participation of all key stakeholders. |           | and adoption by the Agencies and Municipal Authorities, as necessary and appropriate. Meetings and communication will be documented as evidence of involvement and active participation of all key stakeholders.  |                     |                   |            |            |                  |                                  |    |
| <b>Milestone #8</b><br>Finalize workforce communication and engagement plan  | Completed | Workforce communication & engagement plan, including plans for two-way communication with all levels of the workforce, signed off by PPS workforce governance body (e.g. workforce transformation committee).   | 07/01/2015          | 03/31/2016        | 07/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |
| <b>Task</b><br>1. The PMO will complete an assessment of key stakeholder groups to evaluate their current commitment and the level of commitment required from them for projects to succeed.   | Completed | 1. The PMO will complete an assessment of key stakeholder groups to evaluate their current commitment and the level of commitment required from them for projects to succeed. This assessment will be conducted as a survey.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. The PMO will analyze the communication needs and required key messages by audience group, as well as the available communication channels that can be utilized for stakeholder engagement.   | Completed | 2. The PMO will analyze the communication needs and required key messages by audience group, as well as the available communication channels that can be utilized for stakeholder engagement. This will build on the initial communication plan developed by the PAC in November 2014.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>3. The PMO in collaboration with the Workforce Coordinating Council which includes labor, worker, and other key partner representation, will develop a strategy to communicate and engage the workforce.  | Completed | 3. The PMO in collaboration with the Workforce Coordinating Council which includes labor, worker, and other key partner representation, will develop a strategy to communicate and engage the workforce. This strategy will establish the vision, objectives and guiding principles as a means to engage key stakeholders, signed off by the PAC Executive Committee. | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. The PMO and Workforce Coordinating Council will develop a communication and engagement plan.   | Completed | 4. The PMO and Workforce Coordinating Council will develop a communication and engagement plan, which will include objectives, principles, target audience, channel, barriers and risks, milestones, and effectiveness measurements. The communication and engagement plan will be approved by the PAC's Executive Committee.   | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Milestone #9</b><br>Inclusion of CBOs in PPS Implementation.  | Completed | Explain your plans for contracting with CBOs and their continuing role as your PPS develops over time; detail how   | 10/01/2015          | 03/31/2017        | 10/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           | NO |





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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
|   |           | many CBOs you will be contracting with and by when; explain how they will be included in project delivery and in the development of your PPS network.  |                     |                   |            |            |                  |                                  |    |
| <p><b>Task</b><br/>The five county regional area served by our PPS includes many CBOs. There is a rich history of community mobilization and empowerment, with grass roots organizations emerging to address the myriad of social, economic and other issues faced in our communities. Some, like Equinox, the AIDS Council of NENY and the Trinity Alliance of the Capital Region, Inc. are large and sophisticated, with numerous services at various sites. Others, like the Albany Damien Center and Caregivers Inc., are small with more limited services and focus. We have a catalogue of existing CBOs that was generated by our community needs assessment. In addition, many other CBOs have joined our PPS, and additional providers will be recruited and encouraged to participate. As the detailed implementation plan roles out and we continue to have community forums and focus groups, we will identify additional community stakeholders with whom we may contract. We recognize that these organizations have a unique ability to reach the uninsured and high utilizing Medicaid beneficiaries in ways that the bigger health institutions cannot. We expect to enter into contracts with Equinox, Alliance for Positive Health, Catholic Charities, the Interfaith Partnership for the Homeless, Senior Services of Albany and several others not yet identified. These organizations will be critical to several of our projects, including 2.d.i., 2.a.iii, 2.b.iii, and 3.a.ii. This process will evolve as we move</p> | Completed | <p>The five county regional area served by our PPS includes many CBOs. There is a rich history of community mobilization and empowerment, with grass roots organizations emerging to address the myriad of social, economic and other issues faced in our communities. Some, like Equinox, the AIDS Council of NENY and the Trinity Alliance of the Capital Region, Inc. are large and sophisticated, with numerous services at various sites. Others, like the Albany Damien Center and Caregivers Inc., are small with more limited services and focus. We have a catalogue of existing CBOs that was generated by our community needs assessment. In addition, many other CBOs have joined our PPS, and additional providers will be recruited and encouraged to participate. As the detailed implementation plan roles out and we continue to have community forums and focus groups, we will identify additional community stakeholders with whom we may contract. We recognize that these organizations have a unique ability to reach the uninsured and high utilizing Medicaid beneficiaries in ways that the bigger health institutions cannot. We expect to enter into contracts with Equinox, Alliance for Positive Health, Catholic Charities, the Interfaith Partnership for the Homeless, Senior Services of Albany and several others not yet identified. These organizations will be critical to several of our projects, including 2.d.i., 2.a.iii, 2.b.iii, and 3.a.ii. This process will evolve as we move through stages of implementation and our detailed project work plans. We expect that most contracts will be executed by DY2, Q4.</p> | 10/01/2015          | 03/31/2017        | 10/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |    |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|----|
| through stages of implementation and our detailed project work plans. We expect that most contracts will be executed by DY2, Q4. |        |             |                     |                   |            |          |                  |                                  |    |

**IA Instructions / Quarterly Update**

| Milestone Name  | IA Instructions   | Quarterly Update Description  |
|---|---|---|
| Finalize governance structure and sub-committee structure             | If there have been changes, please describe those changes and upload any supporting documentation as necessary. | Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box. |
| Finalize bylaws and policies or Committee Guidelines where applicable | If there have been changes, please describe those changes and upload any supporting documentation as necessary. | Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box. |

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                             | File Name  | Description   | Upload Date         |
|---|---------|---------------------------------------|--|---|---------------------|
| Finalize governance structure and sub-committee structure   | mcintyc | Templates                             | 1_DY2Q4_GOV_MDL21_PRES1_TEMPL_GOV NANCE_Meeting_Schedule_Template_1.1.17...3.31.17_14085.xlsx      | GOVERNANCE Meeting Schedule Template                      | 04/28/2017 09:23 AM |
|   | mcintyc | Templates                             | 1_DY2Q4_GOV_MDL21_PRES1_TEMPL_Governance_Committee_Template_1.1.17...3.31.17_14074.xlsx            | Governance Committee Template 1.1.17...3.31.17            | 04/28/2017 09:14 AM |
| Establish a clinical governance structure, including clinical quality committees for each DSRIP project                                       | mcintyc | Templates                             | 1_DY2Q4_GOV_MDL21_PRES2_TEMPL_Clinical_Governance_Committee_Template_1.1.2017-3.31.2017_14076.xlsx | Clinical Governance Committee Template 1.1.2017-3.31.2017 | 04/28/2017 09:16 AM |
| Finalize bylaws and policies or Committee Guidelines where applicable   | mcintyc | Policies/Procedures                   | 1_DY2Q4_GOV_MDL21_PRES3_P&P_BHNNY_Bylaws_01.2017_final_(2)_14077.docx                              | BHNNY_Bylaws 01.2017 final                                | 04/28/2017 09:17 AM |
| Establish governance structure reporting and monitoring processes   | mcintyc | EHR/HIE Reports and Documentation     | 1_DY2Q4_GOV_MDL21_PRES4_EHR_AMCHPPS_Hixny_03282017_14081.xlsx                                      | AMCHPPS_Hixny_03282017                                    | 04/28/2017 09:20 AM |
|   | mcintyc | Baseline or Performance Documentation | 1_DY2Q4_GOV_MDL21_PRES4_BASE_20161113_Newsletter_Performance_Measures_14079.pdf                    | 20161113 Newsletter Performance Measures                  | 04/28/2017 09:19 AM |
| Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless | mcintyc | Templates                             | 1_DY2Q4_GOV_MDL21_PRES5_TEMPL_Community_Engagement_Template_DY2Q4_14084.xlsx                       | Community Engagement Template DY2Q4                       | 04/28/2017 09:22 AM |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID  | File Type                   | File Name   | Description  | Upload Date         |
|--|----------|-----------------------------|---|--|---------------------|
| services, housing providers, law enforcement)          |          |                             |   |  |                     |
| Finalize partnership agreements or contracts with CBOs | curranj1 | Templates                   | 1_DY2Q4_GOV_MDL21_PRES6_TEMPL_AMCH_PPS_Community_Based_Organizations_Template_1.1.2017-3.31.2017_14243.xlsx | AMCH PPS Community Based Organizations Template 1.1.2017-3.31.2017 | 04/28/2017 12:09 PM |
| Finalize workforce communication and engagement plan   | mcintyc  | Templates                   | 1_DY2Q4_GOV_MDL21_PRES8_TEMPL_workforce_committee_roster_14089.xlsx   | workforce committee roster   | 04/28/2017 09:32 AM |
| Inclusion of CBOs in PPS Implementation.               | mcintyc  | Meeting Materials           | 1_DY2Q4_GOV_MDL21_PRES9_MM_Board_Approval_15363.pdf   | Board Approval   | 06/19/2017 01:24 PM |
|  | mcintyc  | Documentation/Certification | 1_DY2Q4_GOV_MDL21_PRES9_DOC_AMCH_PPS_Recommendation_5_and_6_14087.pdf                                       | AMCH PPS Recommendation 5 and 6                                    | 04/28/2017 09:27 AM |

**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text  |
|--|---|
| Finalize governance structure and sub-committee structure  | There has been a change in the CFO position. an interim is in place and will be permanently filled May 1  |
| Establish a clinical governance structure, including clinical quality committees for each DSRIP project  |   |
| Finalize bylaws and policies or Committee Guidelines where applicable  | BHNNY is now recognized as the lead entity and therefore By-Laws have been updated and approved by the PPS Board to reflect that  |
| Establish governance structure reporting and monitoring processes  |   |
| Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)                |   |
| Finalize partnership agreements or contracts with CBOs   |   |
| Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.) |   |
| Finalize workforce communication and engagement plan   |   |
| Inclusion of CBOs in PPS Implementation.   | This milestone aligns to our overall midpoint assessment action plan approved in March. The Board has now separately approved this document for milestone submission. The IA recommends that BHNNY develop a clear strategy for contracting with CBOs and to therefore finalize contracting with CBO partners. BHNNY already has a Consumer and Community Affairs Committee (CCAC) established, conducts listening sessions with Medicaid recipients, and hosts regional forums |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name | Narrative Text  |
|----------------|---|
|                | <p>for DSRIP informational purposes. BHNNY also participates in community led events and holds a seat at many community based meetings including CORESTAT, LEAD, HCDI, PHIP, SHIP, and CHIP. BHNNY, along with its participating providers – mainly those who are community-based organizations – have collaborated in events such as the CUT Hypertension initiative, The Delaware Ave Community Event, Albany Community Action Partnership 50th Anniversary Block Party, and YMCA's "Voice Your Vision" among many others. By participating in these events, BHNNY is increasingly aware of the CBOs in our region, the services they provide, and how we can collaborate in order to provide quality care for patients.</p> <p>BHNNY will continue to participate in community led events as well as continue to engage neighborhood/community CBOs such as barbershops, churches and education centers. The PPS will also work closely with the S2AY Rural Health Network to identify technical assistance needs of CBOs and educate them on resources and subcontracting pertaining to DSRIP. The CCAC and S2AY Rural Health Network are met in April 2017 to discuss the CBO Needs Assessment. Additionally, through the efforts of the CCAC, the PPS will schedule and facilitate networking sessions for CBOs both in and out of network. These events will be designed to communicate the current and future states of DSRIP and the PPS; along with gathering information from CBOs regarding community resources, and services, and technical assistance needs will be a topic of discussion.</p> <p>BHNNY will continue to engage and leverage Tier 1 CBOs for their expertise at the committee level, their knowledge and support at community events as well as best practice sharing via face to face meetings. Tracking of Tier 1 CBOs new to the network will be documented through the execution of BAA and POA. It is important to note that some CBOs may choose to be engaged, but may not enter into contracts due to a lack of resources and the inability to commit to deliverables. BHNNY has currently entered into partnership agreements with the following Tier 1 CBOs; Albany County Woman and Infant Linking Lifetime Opportunities for Wellness, Black Nurses Coalition, Catholic Charities, Community Caregivers, De Paul House Management, Healthy Capital District Initiative, In Our Own Voices, Independent Living Centers of Hudson Valley, Mental Health Empowerment Project Shelters of Saratoga, Trinity Alliance and Wildwood Programs among others. Domain 4 projects, along with 2.d.i, 3.b.i and 3.d.iii will be the focus for CBO contracts. Contracts are being developed and implemented to include CBOs in our centralized care management model. These contracts will leverage and enhance existing services provided by CBOs in our region to create a cohesive support system for patients in need of care.</p> <p>Lastly, feedback of beneficiaries is extremely important in the development and promotion of preventative care. RFPs for Consumer Listening Sessions will continue to be issued across the PPS service area and for beneficiaries' feedback pertaining to healthcare best practices, needs and barriers. Feedback will be documented and handed off by CBOs and other partners to the PMO and onto NYSDOH. The PMO will also facilitate consumer workgroups work with beneficiaries in collaboration with partnering CBOs.</p> |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |
| Milestone #3 | Pass & Complete |                    |
| Milestone #4 | Pass & Complete |                    |
| Milestone #5 | Pass & Complete |                    |
| Milestone #6 | Pass & Complete |                    |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Milestone Review Status**

| <b>Milestone #</b>  | <b>Review Status</b> | <b>IA Formal Comments</b> |
|---------------------|----------------------|---------------------------|
| <b>Milestone #7</b> | Pass & Complete      |                           |
| <b>Milestone #8</b> | Pass & Complete      |                           |
| <b>Milestone #9</b> | Pass & Complete      |                           |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 2.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✔ IPQR Module 2.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in implementing your governance structure and processes and achieving the milestones described above, as well as potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

There will be challenges in governance as we move forward. One challenge will be to determine whether AMCH pursues creating a new legal entity to assume legal authority for the organization, management and operation of the PPS as the Lead Entity. There may be advantages to AMCH in pursuing this strategy. We continue to follow a collaborative contracting model at present. Our PPS is smaller in comparison with others, and there are advantages to having one ultimate organizational decision-maker, AMCH, in charge of the most significant issues. With that said, the PAC's Executive Committee and the PPS Board have clearly delineated roles and responsibilities to achieve shared governance. Second, we continue to be surprised at the lack of knowledge within certain health or health-related organizations and CBOs about DSRIP. Too many remain disengaged because they are not aware of what the project is attempting to do. More work needs to be done by the PPS and the NYSDOH to get the word out about the significance of what we are all trying to do to transform the health care system. The third risk relates to perception. Some of our current participating organizations are not going to be funded by DSRIP monies. They may have a marginal role and may not be involved in any specific project, with the probable exception of 2.a.i. When funding decisions get made and contracts executed, they are likely to become disengaged. We will continue to educate them and the community about their role, even if unfunded, in helping to integrate the care delivery system and transform payment mechanisms to value based arrangements. A fourth risk relates to non-safety net provider payment caps. As we transform and integrate care, more outpatient providers will become involved, who do not meet the safety net definition. We will continue to work to address this so that the 5% cap does not become a barrier to successful governance and community engagement. A fifth risk relates to dispute resolution. To address this and minimize potential conflict, we will lay out a transparent and fair process for dispute resolution. A sixth risk relates to overall adequacy of funding. Our small PPS size works against us in terms of fixed overhead and administrative expense. We still need to fund all of the key activities in the Project Management Office (PMO) required to manage the entire endeavor. However, as a percentage of the total award, our administrative expense is likely to be higher than others, due to their economies of scale. The challenge this creates is that we may not be adequately resourced to either manage the PPS and the 11 projects we are undertaking or we will not have adequate funding to do key things required to successfully implement all project activities. We are working to address this through a conservative approach to staffing, but this creates other risks and challenges if it ends up being under-resourced. We will be prudent in our fiscal stewardship of these taxpayer funds. Finally, we recognize that the success of our governance requires voluntary engagement of individuals and organizations who do not have time to do everything that may be asked of them. This is a particular concern with our PCPs, psychiatrists and other licensed providers. We need their engagement, leadership and input. Gaining the cooperation of providers to invest in developing key capabilities will require a governance process which generates trust through open and active engagement, development of multi-directional communications processes, and opportunities for provider and public comment on major developments and initiatives. We will mitigate our risks through effective communication, community engagement, transparent decision making, targeted approaches to enlist CBOs in the process and a fair process to distribute funds and resolve disputes.

#### ✔ IPQR Module 2.4 - Major Dependencies on Organizational Workstreams



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The interdependencies of each element and each project in this endeavor are significant. The overall value to the PAC and the transformation of care is both positive and synergistic. The downside, however, is that the interrelationships of each component creates dependencies that require everything succeed and that this success be based on a sequential plan that requires strict adherence to deadlines. The most important initial component relates to staffing. Successful implementation efforts and governance will be extremely dependent on staffing the PMO with motivated, high energy staff committed to the success of the entire project. It will take time to recruit and then train and orient professional staff to manage the complex affairs of the PAC, on behalf of the lead institution, AMCH or a later-formed Newco. It is hard to identify which of several other components are the next priority, since many happen at the same time. At a minimum, effective management and development of a comprehensive fiscal and IT strategy that are integrally linked to the success of the governance structure and model are necessary. Paying individuals and organizations via contract will ensure engagement and participation. Developing the IT strategy requires careful consideration of accurate data collection and reporting capabilities as well as the PMO's capacity to analyze complex data from disparate sources. Populating the 7 committees of the PAC to provide the expertise needed for informed decision making is an essential next step. Each of these areas need to be operating effectively to facilitate effective PPS governance. Open and transparent decision-making will be essential to developing and maintaining the trust and engagement of participating providers, and the community at large. Maintaining strong relationships with workforce stakeholders is important to system transformation. Practitioner engagement and leadership is critical to not only the development of and compliance with clinical care protocols, but with achieving levels of coordination and collaboration required to eliminate avoidable service utilization. The lead institution, the participating providers, the NYSDOH and the community at large all need to trust the governance structure and PPS leadership team to do the right thing. This trust must be earned. We remain committed, by consistent demonstration of our efforts, to earn this trust.





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**✔ IPQR Module 2.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for the development of your governance structure and processes and describe what their responsibilities involve.

| Role   | Name of person / organization (if known at this stage)  | Key deliverables / responsibilities  |
|--|---|--|
| AMCH Board                                       | AMCH Board  | Appoint members of PPS Board, review reports and findings of PPS Board; approve PPS Code of Conduct and Compliance Plan.   |
| BHNNY Board                                      | BHNNY Board   | Establish governance committees; approve committee charters and members; review committee recommendations and reports; approval of PAC charter and operating principles. |
| PAC Executive Committee                          | BHNNY key stakeholders and nominated sub-committee chairs , Project Management Office, and Legal Counsel  | Development and approval of PAC Charter and Operating Principles, Committee charters, and PPS Policies; funding and staff resources.                                     |
| Major Hospital Partners                          | Columbia Memorial Hospital, Saratoga Hospital and Albany Medical Center Hospital  | Members of PAC Committees; staff support.  |
| Physician organizations and large practices      | CapitalCare Medical Group, LLC., Community Care Physicians, PC., AMC Faculty Practice, Planned Parenthood, etc.   | Members for Board and PAC Committees, Care Management Protocols.   |
| ACOs, Health Homes                               | Montefiore Medical Center, Regional Health Homes  | Disease, Case and Care Management Protocols and Procedures.  |
| Major CBOs and/or Social Service Agencies        | Equinox, Catholic Charities, et.al.   | PPS Committee members, program information, liaisons.  |
| Behavioral Health Providers                      | Capital District Psychiatric Center, The Addictions Care Center of Albany, Inc., Conifer Park, Catholic Charities, Equinox, Northern Rivers, Albany Medical Center Faculty Practice, etc. | Behavioral Health Engagement and Participation   |
| Key advisors, counselors, attorneys, consultants | Albany Medical Center Legal Counsel, Bond, Schoeneck and King, LLC, Cicero and Rinaldi, LLC; Montefiore Medical Center as an ASO  | Drafts governance documents, provider agreements, policies and procedures, etc.  |



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**✔ Module 2.6 - IPQR Module 2.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS with regard to your governance structure and processes.

| Key stakeholders  | Role in relation to this organizational workstream   | Key deliverables / responsibilities   |
|---|--|---|
| <b>Internal Stakeholders</b>  |  |   |
| Albany Medical Center Hospital: Dr. S. Frisch, Dr. D. McKenna, Dr. K. Manjunath, G. Kochem, G. Hickman, F. Spreer-Albert, C. Burke  | Lead Applicant and Equity Contributor, Leadership Participant. Under the leadership of AMCH, the PMO will conduct the business of the lead applicant for all deliverables required by organizational milestones and metrics as identified in the work plan. As the largest institutional Medicaid provider, and one of the largest safety-net providers in the PPS, AMCH will also play an active role in terms of project implementation and work stream development across the project period.   | Funding, leadership personnel, committee chairs, PAC Executive Committee participant.   |
| Albany Medical College Faculty Physicians Group: Dr. F. Venditti, Dr. R. Blinkhorn, Dr. D. Clark, Dr. C. King, Dr. V. Balkoski, Dr. J. Rosenberger, Dr. P. Sorum, Dr. J. Desemone, J. Quinlan, C. Selke, P. Hildreth, G. Sleeper, A. Gallucci, M. Weygant | Physician Leadership will actively engage in clinical integration, training, protocol development, IT infrastructure, and fiscal planning to further the aims of integration and financial payment reform across the network. As one of the largest Primary Care providers for both adult and pediatric patients, as well as the region's only medical college, the faculty physician's group will play an important role in care integration and PCMH by providing training to students, residents, and fellows in the new model of care. | Funding, leadership personnel, committee chairs, PAC Executive Committee participant.   |
| Albany Medical College - Education and Training: Dr. H Pohl, Dr. I. Allard, Dr. J. Bartfield, Dr. V. Verdile, Dr. E. Higgins, D. Guyett   | The College will assist with the development of content, evaluative criteria, and electronic access to learning modules to assist the PMO with workforce development and other activities required by DSRIP implementation. The College will also assist the PPS in obtaining CME credits as an engagement tool as necessary and appropriate.  | Leadership personnel, Workforce and Cultural Competency and Health Literacy Committees. |
| Columbia Memorial: J. Caruthers, W. Van Slyke, Dr. G. Davis, B. Ratfield, B. Mahoney  | As a key stakeholder, this hospital will play an important sub-regional role in terms of leadership development, clinical integration, fiscal planning, IT development, practitioner engagement, quality improvement, and workforce. Columbia Memorial will serve as a regional hub for Columbia and Greene counties and will coordinate and integrate service providers within the Southern regional hub.   | Leadership personnel, committee members, PAC Executive Committee.                       |



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| Key stakeholders  | Role in relation to this organizational workstream   | Key deliverables / responsibilities  |
|---|--|--|
| Saratoga Hospital: A. Carbone, Dr. J. LaPlante, J. Mangona, D. Jones, J. Methven, G. Foster | As a key stakeholder, this hospital will play an important sub-regional role in terms of leadership development, clinical integration, fiscal planning, IT development, practitioner engagement, quality improvement, and workforce. Saratoga Hospital will serve as a regional hub for Saratoga and Warren counties and will coordinate and integrate service providers within the Northern regional hub.   | Leadership personnel, committee members, PAC Executive Committee.                          |
| Contracted CBOs   | Participating CBOs will be actively engaged in the development of strategies to involve consumers, assistance with community engagement, coordination of outreach efforts, and communication. CBOs may also participate in PAM assessments, treatment plan development and management, and identification of local needs consistent with the terms and conditions of the waiver.   | Leadership personnel, Consumer and Community Engagement Committee leadership/membership.   |
| Numerous Primary Care and Behavioral Health Organizations                                   | These participating organizations will be critical stakeholders to engage in integration and transformation at the site level. They will provide feedback and input to the CQAC to ensure provider participation, quality improvement and accuracy and completeness of data reporting.   | Leadership personnel, PAC member, Clinical and Quality Affairs membership.                 |
| <b>External Stakeholders</b>  |  |  |
| Public Health and Social Services Agencies; Dr. E. Whalen                                   | As public agencies, these participating organizations will assist with public health and community needs assessments, prevention planning, workforce issues, and other strategies consistent with their mission. County-run agencies will also be actively engaged in various projects, as well as helping to communicate across the county the action steps and deliverables required for successful implementation. Those agencies who offer specific services, e.g. mental health counseling, will also participate in CQAC activities and other deliverables as warranted. | Educate the community about DSRIP, the importance of prevention, and how to access care.   |
| Medicaid Beneficiaries  | Participate in their own care and provide feedback   | Through surveys and other means, provide feedback.   |
| NYSDOH  | Provide oversight, direction, and data   | Provide ongoing feedback regarding deliverables and data necessary for reporting purposes. |



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#### ✅ IPQR Module 2.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream and your ability to achieve the milestones described above.

It is expected that the Clinical and Quality Affairs Committee will approve and oversee implementation of methods to capture baseline data and support the systematic capturing of data related to metric evaluation and milestone reporting required for each project over the five years of the program. Otherwise, progress reporting for governance initially has limited dependence on having essential IT infrastructure in place. Unlike other components of this implementation plan that cannot move forward or even measure success without IT, governance is different. Our reporting requires documentation of decision-making, approval of plans, governance documents and other related items. It is largely a process driven activity that is not dependent on clinical and other data to demonstrate success or failure, at least in DY1. It is not critical for the effective initial activities of the PAC, the committees or the PPS Board that the IT infrastructure is in place in the first few quarters. In fact, it will not happen that way sequentially. Governing bodies must be fully engaged prior to full implementation of our IT infrastructure. Governance must decide, based on the feedback from the committees, the NYSDOH and others, exactly what investments, from the limited pool of funds available, need to be made to create the IT infrastructure. The PMO will purchase project management software that will assist in required areas of reporting and project management and analysis, but this is only the initial phase of IT infrastructure development and does not have clinical implications.

#### ✅ IPQR Module 2.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

Much of the reporting required for evaluation of the success of our efforts at governance will be documented via written materials, like meeting minutes, approved governance documents, operating policies and procedures and guidelines and all of our various approved plans, like our Consumer and Community Engagement Plan. We will also continue to record our web-based meetings and will provide materials that were presented, lists of registered attendees and action steps, if any, resulting from the question and answer sessions included in each monthly update. To assist the community and to demonstrate our transparency, each of these documents or recorded sessions will be available on our public domain website for review and comment. To the extent possible, we will also provide documented summaries of meetings between our PPS and the overlapping PPSs to demonstrate our efforts to collaborate and cooperate on various initiatives.

#### IPQR Module 2.9 - IA Monitoring

##### Instructions :



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**Section 03 – Financial Stability**

**✅ IPQR Module 3.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Milestone #1</b><br>Finalize PPS finance structure, including reporting structure   | Completed | This milestone must be completed by 12/31/2015. PPS finance structure chart / document, signed off by PPS Board.  | 04/01/2015          | 12/31/2015        | 04/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. AMCH's PAC Executive Committee will recommend members for appointment to the Finance Committee to AMCH Executive Steering Committee (PPS Board). | Completed | 1. AMCH's PAC Executive Committee will work with PPS membership of the PAC to identify appropriate members of the Finance committee to ensure appropriate capability, geographic representation and a broad provider representation from across the PPS. The PAC Executive Committee will recommend members for appointment to the Finance Committee to AMCH Executive Steering Committee (PPS Board).  | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |
| <b>Task</b><br>2. AMCH PPS's Finance committee will develop a Committee charter.   | Completed | 2. AMCH PPS's Finance committee will develop a Committee charter to be presented to the AMCH PAC Executive Committee and the PPS Board for review and approval.   | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |
| <b>Task</b><br>3. The PAC Finance Committee will define clear fiscal responsibilities for management of DSRIP funds and PPS financial operations.                  | Completed | 3. Reporting up to the PPS Board and AMCH's DSRIP Project Management Office (PMO), the PAC Finance Committee will define clear fiscal responsibilities for management of DSRIP funds and PPS financial operations, including budget and funds flow preparation, fund disbursement, financial reporting by AMCH PPS to DOH and from partners to AMCH PPS, and internal controls. These deliverables will be reviewed and approved by PPS Board, the PAC Executive Committee and the voting members of the PAC. | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>4. The PPS Board will approve the charter for   | Completed | 4. The PPS Board will approve the charter for the Finance   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



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| Milestone/Task Name  | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| the Finance Committee of the PPS.  |           | Committee of the PPS. The Finance Committee will develop financial budgeting and reporting processes working with other PAC committees, providers and PMO leadership.  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>5. AMCH PPS's Finance Committee will recommend financial budgeting, management and reporting structures to the PPS Board, ensuring that funds are appropriately segregated, managed and utilized in a manner that is consistent with the goals and objectives of DSRIP. | Completed | 5. AMCH PPS's Finance Committee will recommend financial budgeting, management and reporting structures to the PPS Board, ensuring that funds are appropriately segregated, managed and utilized in a manner that is consistent with the goals and objectives of DSRIP.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>6. The PAC Executive Committee approves budgeting and reporting structure, and recommends the structure for approval by the PPS AMC Board.  | Completed | 6. The PAC Executive Committee approves budgeting and reporting structure, and recommends the structure for approval by the PPS AMC Board.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Milestone #2</b><br>Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.  | Completed | This milestone must be completed by 3/31/2016. Network financial health current state assessment (to be performed at least annually). The PPS must:<br>- identify those providers in their network that are financially fragile, including those that have qualified as IAAF providers;<br>-- define their approach for monitoring those financially fragile providers, which must include an analysis of provider performance on the following financial indicators: days cash on hand, debt ratio, operating margin and current ratio;<br>-- include any additional financial indicators that they deem necessary for monitoring the financial sustainability of their network providers | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. AMCH PPS Finance Committee will identify appropriate financial metrics and conduct a survey to identify financially fragile members of the PPS.  | Completed | 1. AMCH PPS Finance Committee will identify appropriate financial metrics and conduct a survey to identify financially fragile members of the PPS.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>2. AMCH PPS PMO, along with the Finance Committee, will complete and update the original financial assessment from the project planning   | Completed | 2. AMCH PPS PMO, along with the Finance Committee, will complete and update the original financial assessment from the project planning phase. A key component of this assessment will be to identify partners experiencing financial  | 08/01/2015          | 09/30/2015        | 08/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| phase. A key component of this assessment will be to identify partners experiencing financial distress that are essential to DSRIP Project success.   |           | distress that are essential to DSRIP Project success.  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>3. AMCH PPS Finance Committee will identify necessary steps, such as evaluation of staffing, cash on hand, debt ratio, operating margin, and current ratio, as well as other financial indicators, to help identify financially fragile organizations. To the extent feasible, the PPS will assist financially fragile organizations to regain sound financial status by offering technical support or other guidance as deemed appropriate by the committee and approved by the AMCH PAC Executive Committee. Meetings with key leaders and decision makers will be facilitated to discuss the findings. A plan will be crafted to help transition said organizations' financial status. Key benchmarks, financial models, and goals will be provided, as well as financial coaching, training, and other resources as necessary. | Completed | 3. AMCH PPS Finance Committee will identify necessary steps, such as evaluation of staffing, cash on hand, debt ratio, operating margin, and current ratio, as well as other financial indicators, to help identify financially fragile organizations. To the extent feasible, the PPS will assist financially fragile organizations to regain sound financial status by offering technical support or other guidance as deemed appropriate by the committee and approved by the AMCH PAC Executive Committee. Meetings with key leaders and decision makers will be facilitated to discuss the findings. A plan will be crafted to help transition said organizations' financial status. Key benchmarks, financial models, and goals will be provided, as well as financial coaching, training, and other resources as necessary. | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>4. AMCH PPS Finance Committee will develop an ongoing monitoring process to assess at risk providers, including periodic assessments of key financial ratios. This plan will be communicated to providers through the PMO as appropriate.  | Completed | 4. AMCH PPS Finance Committee will develop an ongoing monitoring process to assess at risk providers, including periodic assessments of key financial ratios. This plan will be communicated to providers through the PMO as appropriate.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Milestone #3</b><br>Finalize Compliance Plan consistent with New York State Social Services Law 363-d  | Completed | This milestone must be completed by 12/31/2015. Finalized Compliance Plan (for PPS Lead).  | 04/01/2015          | 12/31/2015        | 04/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. AMCH PPS Audit and Compliance Committee in collaboration with the PPS compliance officer and legal council, will develop a Code of Conduct and Compliance Plan that encompass the required compliance elements set forth in NYS Social Services Compliance Law 363-d as applied to the PPS.   | Completed | 1. AMCH PPS Audit and Compliance Committee in collaboration with the PPS compliance officer and legal council, will develop a Code of Conduct and Compliance Plan that encompass the required compliance elements set forth in NYS Social Services Compliance Law 363-d as applied to the PPS.   | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |





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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| Social Services Compliance Law 363-d as applied to the PPS.   |           |  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>2. AMCH PPS Audit and Compliance Committee will present the Code of Conduct and Compliance Plan to the PPS Board for review and approval.  | Completed | 2. AMCH PPS Audit and Compliance Committee will present the Code of Conduct and Compliance Plan to the PPS Board for review and approval.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>3. PPS Board reviews and adopts the Code of Conduct and Compliance Plan; the AMCH Board of Governors reviews and adopts the Code of Conduct and Compliance Plan. The Board approved Code of Conduct and Compliance Plan are disseminated to the PAC. | Completed | 3. PPS Board reviews and adopts the Code of Conduct and Compliance Plan; the AMCH Board of Governors reviews and adopts the Code of Conduct and Compliance Plan. The Board approved Code of Conduct and Compliance Plan are disseminated to the PAC. | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>4. PMO staff in collaboration with the WCC will develop a Compliance Plan and Code of Conduct training strategy for the PPS.   | Completed | 4. PMO staff in collaboration with the WCC will develop a Compliance Plan and Code of Conduct training strategy for the PPS.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>5. AMCH PPS continues implementation operation of the Compliance Program. AMCH PPS Executive Director completes OMIG's required certification for Compliance Program.  | Completed | 5. AMCH PPS continues implementation operation of the Compliance Program. AMCH PPS Executive Director completes OMIG's required certification for Compliance Program.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Milestone #4</b><br>Develop a Value Based Payments Needs Assessment ("VNA")  | Completed | Administer VBP activity survey to network  | 07/01/2015          | 09/30/2016        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           | YES |
| <b>Task</b><br>1. AMCH's PMO staff in collaboration with the Finance Committee will gather baseline Medicaid aggregate revenue data and methods of reimbursement to determine fee for service and value based payment streams existing in the PPS.                  | Completed | 1. AMCH's PMO staff in collaboration with the Finance Committee will gather baseline Medicaid aggregate revenue data and methods of reimbursement to determine fee for service and value based payment streams existing in the PPS.                  | 09/01/2015          | 09/30/2015        | 09/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |
| <b>Task</b><br>2. AMCH's PMO staff and Finance Committee will develop and disseminate educational materials.  | Completed | 2. AMCH's PMO staff and Finance Committee will develop and disseminate educational materials as part of a broader communication strategy for the PPS network including information to be shared with providers.                                      | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



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|---|-------------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Task</b><br>3. AMCH's PMO will assess network readiness to transform to VBP.   | Completed   | 3. AMCH's PMO will assess network readiness to transform to VBP.   | 09/30/2015          | 12/31/2015        | 09/30/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>4. AMCH PPS will survey providers regarding their VBP contracts.   | Completed   | 4. AMCH PPS will survey providers regarding their VBP contracts and if they have any, what are their compensation modalities. Survey information will be presented to the Finance Committee and the PAC Executive Committee.   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>5. AMCH PPS Finance Committee will analyze revenue data related to VBP and develop a draft report for AMCH Executive Steering Committee to review and comment.   | Completed   | 5. AMCH PPS Finance Committee will analyze revenue data related to VBP and develop a draft report for AMCH Executive Steering Committee to review and comment.   | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>6. AMCH PPS Finance Committee will finalize a revenue assessment report and submit to AMCH Executive Steering Committee for approval.                            | Completed   | 6. AMCH PPS Finance Committee will finalize a revenue assessment report and submit to AMCH Executive Steering Committee for approval.  | 02/01/2016          | 09/30/2016        | 02/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>7. AMCH PAC Executive Committee will approve the report and communicate results to PPS providers.  | Completed   | 7. AMCH PAC Executive Committee will approve the report and communicate results to PPS providers.  | 03/01/2016          | 09/30/2016        | 03/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Milestone #5</b><br>Develop an implementation plan geared towards addressing the needs identified within your VNA  | In Progress | Submit VBP support implementation plan   | 04/01/2015          | 09/30/2016        | 04/01/2015 | 06/30/2017 | 06/30/2017       | DY3 Q1                           | YES |
| <b>Task</b><br>1. AMCH PMO will establish a VBP workgroup to develop a plan starting with prioritization of potential opportunities and providers for value based arrangements. | Completed   | 1. AMCH PMO will establish a VBP workgroup to develop a plan starting with prioritization of potential opportunities and providers for value based arrangements. Workgroup participants will include AMCH executive leadership, finance committee chair, audit and compliance committee chair, PMO executive director, participating providers and other members as appropriate. | 07/01/2015          | 03/31/2016        | 07/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |     |
| <b>Task</b><br>2. AMCH PPS's PMO and AMC Integrated Delivery System Director will engage Medicaid Managed Care Organizations in dialogue on value based payment methodologies.  | Completed   | 2. AMCH PPS's PMO and AMC Integrated Delivery System Director will engage Medicaid Managed Care Organizations in dialogue on value based payment methodologies. Meetings will be held on a monthly basis during DY1 and DY2.   | 04/01/2015          | 06/30/2015        | 04/01/2015 | 06/30/2015 | 06/30/2015       | DY1 Q1                           |     |
| <b>Task</b><br>3. AMCH PPS's PMO will identify VBP  | Completed   | 3. AMCH PPS's PMO will identify VBP accelerators and challenges within AMCH PPS related to implementation of the   | 01/01/2016          | 09/30/2016        | 01/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |



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| Milestone/Task Name  | Status      | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-------------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| accelerators and challenges within AMCH PPS related to implementation of the VBP models including existing ACO's and MCO models, shared savings arrangements, IT structure requirements and contracting complexities.                                      |             | VBP models including existing ACO's and MCO models, shared savings arrangements, IT structure requirements and contracting complexities.   |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>4. AMCH PPS will align providers and projects where VBP accelerators or challenges exist to develop timelines for VBP implementation.   | Completed   | 4. AMCH PPS will align providers and projects where VBP accelerators or challenges exist to develop timelines for VBP implementation.  | 01/01/2016          | 09/30/2016        | 01/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>5. AMCH PPS's VBP Workgroup will assess all data and development of VBP timeline with MCO's, AMCH Finance Committee, PMO staff, and the PPS.  | Completed   | 5. AMCH PPS's VBP Workgroup will assess all data and development of VBP timeline with MCO's, AMCH Finance Committee, PMO staff, and the PPS.   | 06/01/2016          | 09/30/2016        | 06/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>6. AMCH PPS VBP Workgroup will complete a draft plan for VBP adoption for review and approval by the Finance Committee.   | Completed   | 6. AMCH PPS VBP Workgroup will complete a draft plan for VBP adoption for review and approval by the Finance Committee.  | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>7. AMCH PPS VBP Workgroup will prepare draft plan for presentation to PPS Board and MCO's.  | Completed   | 7. AMCH PPS VBP Workgroup will prepare a draft plan for presentation to the PPS Board and MCO's.   | 09/01/2016          | 09/30/2016        | 09/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>8. PPS Board and MCO's agree upon and approve the plan towards achieving 90% value-based payments across network by year 5 of the waiver. PPS Board approves the VBP plan.  | Completed   | 8. PPS Board and MCO's agree upon and approve the plan towards achieving 90% value-based payments across network by year 5 of the waiver. PPS Board approves the VBP plan.   | 09/01/2016          | 09/30/2016        | 09/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Milestone #6</b><br>Develop partner engagement schedule for partners for VBP education and training   | In Progress | Initial Milestone Completion: Submit VBP education/training schedule<br>Ongoing Reporting: Submit documentation to support implementation of scheduled trainings, including training materials and attendance sheets through quarterly reports | 04/01/2015          | 09/30/2016        | 04/01/2015 | 06/30/2017 | 06/30/2017       | DY3 Q1                           | YES |
| <b>Milestone #7</b><br>≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO | Completed   |  | 04/01/2015          | 09/30/2016        | 04/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           | YES |



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| Milestone/Task Name  | Status    | Description | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| payments captured in VBPs has to be in Level 2 VBPs or higher  |           |             |                     |                   |            |            |                  |                                  |     |
| <b>Milestone #8</b><br>≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher | Completed |             | 04/01/2015          | 09/30/2016        | 04/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           | YES |

**IA Instructions / Quarterly Update**

| Milestone Name  | IA Instructions   | Quarterly Update Description  |
|---|---|---|
| Finalize PPS finance structure, including reporting structure | If there have been changes, please describe those changes and upload any supporting documentation as necessary. | Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box. |

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                   | File Name  | Description                             | Upload Date         |
|---|---------|-----------------------------|--|---|---------------------|
| Finalize PPS finance structure, including reporting structure | mcintyc | Templates                   | 1_DY2Q4_FS_MDL31_PRES1_TEMPL_Finance_Committee_Membership_13545.xlsx         | Finance Committee Membership            | 04/27/2017 08:59 AM |
|   | mcintyc | Templates                   | 1_DY2Q4_FS_MDL31_PRES1_TEMPL_Meeting_Schedule_Template_13544.xlsx            | Meeting Schedule Template               | 04/27/2017 08:59 AM |
| Develop a Value Based Payments Needs Assessment ("VNA")       | mcintyc | Other                       | 1_DY2Q4_FS_MDL31_PRES4_OTH_Milestone_#4_resubmission_170616_15364.docx       | BHNNY VBP Assessment Remediation        | 06/19/2017 01:27 PM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_FS_MDL31_PRES4_DOC_VBP_Baseline_Assessment_analysis_161115_13673.pdf | VBP Baseline Assessment_analysis_161115 | 04/27/2017 10:42 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_FS_MDL31_PRES4_DOC_VBP_Assessment_SurveyMonkey_160830_13670.pdf      | VBP Assessment_SurveyMonkey_160830      | 04/27/2017 10:41 AM |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text  |
|---|---|
| Finalize PPS finance structure, including reporting structure   | BHNNY's CFO position is temporarily filled with an interim CFO and will be filled permanently as of May 1.  |
| Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.  |   |
| Finalize Compliance Plan consistent with New York State Social Services Law 363-d   |   |
| Develop a Value Based Payments Needs Assessment ("VNA")   | In September 2016, the AMCH PPS PMO disseminated a comprehensive value-based purchasing (VBP) assessment to all contracted partners in the network to obtain information that will inform the PPS' VBP strategy and growth plan. This initiative was done collaboratively with COPE Health Solutions, which is the entity that was engaged to assist the PPS with the development of contracts and funds flow. Although a VBP assessment was conducted in 2015 as part of the overall comprehensive baseline assessment, this assessment was created so that the PPS could obtain a more thorough valuation of VBP in the network. The AMCH PPS VBP workgroup, which is comprised of 12 partner organizations from varying capacities and four MCOs, reviewed and approved the assessment prior to distribution.<br><br>Information such as payer mix by service type, details of VBP agreements currently in place, level of VBP, ACO involvement, perceived barriers to success, accelerators in use, support needed, timeline to implement VBP, preferred compensation modalities, and others were obtained through the assessment. An aggregated report of this information will be provided to the PPS so that a plan and strategy to transition the network to VBP can be developed. This strategy/growth plan will include recommendations and comments from COPE Health Solutions, the consultant the PPS engaged to assist in developing the funds flow methodology and contracting process. |
| Develop an implementation plan geared towards addressing the needs identified within your VNA   | This new date aligns with DOH provided dates from 12/2016   |
| Develop partner engagement schedule for partners for VBP education and training   | This new date aligns with DOH provided dates from 12/2016   |
| ≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher |   |
| ≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher   |   |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |



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**Milestone Review Status**

| <b>Milestone #</b>  | <b>Review Status</b> | <b>IA Formal Comments</b>   |
|---------------------|----------------------|---|
| <b>Milestone #2</b> | Pass & Complete      |   |
| <b>Milestone #3</b> | Pass & Complete      |   |
| <b>Milestone #4</b> | Fail                 | The IA has determined per the PPS submission the survey results are not complete. |
| <b>Milestone #5</b> | Pass & Ongoing       |   |
| <b>Milestone #6</b> | Pass & Ongoing       |   |
| <b>Milestone #7</b> | Pass & Ongoing       |   |
| <b>Milestone #8</b> | Pass & Ongoing       |   |



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**✔ IPQR Module 3.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✓ IPQR Module 3.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in implementing these cross-cutting organizational strategies, including potential impacts on specific projects and, crucially, any risks that will undermine your ability to achieve outcome measure targets.

There are many challenges to implementing the organizational strategies required for the financial sustainability work stream that could impact AMCH PPS' efforts to assess and monitor the financial health of the PPS and achieve the outcome measure targets. Implementation of the financial reporting systems needed to monitor the financial stability of the network is key among these risks. Education, communication and eventual buy in from the AMCH PPS providers into the overall goals of DSRIP and the financial structure in place is another key risk factor that will require mitigation. The success of the AMCH PPS in achieving the selected project goals as well as the overall DSRIP Goals is dependent upon current reporting and communication of significant data across the PPS. The IT integration and support needed to collect and analyze the finances and flow of funds is critical to the success of this work stream. The Technology and Data Management Committee is tasked with the development of an integrated IT system to not only support the financial work stream, but the project data and reporting functions needed to reach full integration. There will be a significant need for capital investment that will be critical in the mitigation of this risk. One of the largest risks is the move from a fee for service payment system to a value based payment system in collaboration with the providers and the MCO's. This collaboration will be difficult as both the PPS and the MCO's have a financial interest in the outcomes, and prior to DSRIP, much of that process has been competitive and not collaborative. In addition, providers currently negotiate payments with MCO's individually, but under DSRIP, it is anticipated that negotiations for VBP's with Medicaid MCO's may involve the PPS at some level, although providers in the AMCH PPS will remain free to contract independently with Medicaid MCO's. There will be major hurdles to overcome to effect the change. Also, many of the MCO's currently provide many of the quality improvement functions that the PPS will need to put in place to meet the goals and objectives of DSRIP. To avoid duplication, the PPS will work collaboratively with MCO's for effective resource utilization. These changes will take time and require efficient communication and support from the DOH. To mitigate these risks the PPS will utilize two strategies. First, engagement of PPS providers in the transformation of the payment system through well thought out strategies effectively disseminated. Second, the PPS will develop comprehensive IT integration to facilitate and support payment transformation.

#### ✓ IPQR Module 3.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The financial sustainability work stream is dependent on the IT Systems & Processes work stream. For example, financial decisions from readiness to risk assumption are predicated upon accurate and complete financial data from participating institutions. The success of the financial sustainability work stream is intricately linked to the performance reporting and practitioner engagement work streams. It is not sufficient to have financial data, there must also be active engagement from practitioners and organizational leadership. The financial sustainability work stream is dependent upon governance. The transition to VBP payment arrangements will require strong leadership from the governance structures of the





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### Albany Medical Center Hospital (PPS ID:1)

AMCH PPS to lead the transformation of the payment system. The PPS Board and PPS committees, as the guiding bodies of the PPS, must provide an effective, engaged governance process to establish the roles and responsibilities of all committees and participating providers. The financial sustainability work stream is dependent upon a workforce committed to successful transformation to a sustainable business model. All other work streams are dependent upon financial sustainability to ensure their success rather than financial sustainability having major dependencies on those work streams.



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**✔ IPQR Module 3.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| Role   | Name of person / organization (if known at this stage)  | Key deliverables / responsibilities   |
|--|---|---|
| AMCH Board of Directors, PMO Chief Executive Officer | Louis Filhour, PhD  | Manage project efforts to transform payment models across the delivery system.  |
| Chair, Finance Committee                             | Frances Spreer-Albert   | Manage the affairs of the finance committee including the development of the financial plan.  |
| AMCH Compliance Officer                              | Noel Hogan  | Certify PPS compliance plan to the Department of Health.  |
| Vice President, Integrated Delivery Systems          | Joan Martin   | Monthly engagement with MCOs.   |
| PPS Interim Chief Financial Officer                  | Darren Dowell   | Manage PPS financial operations, planning and analysis, including budget and funds flow development, financial reporting and tracking, and PPS financial performance. |
| Contracted Behavioral Health Provider Organizations  | Capital District Psychiatric Center, The Addictions Care Center of Albany, Inc., Conifer Park, Catholic Charities, Equinox, Northern Rivers, Albany Medical Center Faculty Practice | Behavioral Health Engagement and participation  |



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**✔ IPQR Module 3.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>                         | <b>Role in relation to this organizational workstream</b> | <b>Key deliverables / responsibilities</b>  |
|---|---|---|
| <b>Internal Stakeholders</b>                    |   |   |
| Albany Medical Center Hospital                  | Active participation                                      | Willing participation in new payment models.  |
| Albany Medical College Faculty Physicians Group | Active participation                                      | Willing participation in new payment models.  |
| Participating PPS Providers                     | Active participation                                      | Willing participation in new payment models.  |
| Workers   | Supportive role   | Willing participation in new payment models.  |
| <b>External Stakeholders</b>                    |   |   |
| NYSDOH  | Payment   | Payments will follow waiver requirements, milestone reporting and metrics per executed contracts. |
| Local agencies serving Medicaid Population      | Engagement  | Engage consumers in behavioral modification.  |
| CBOs, as necessary                              | Community engagement                                      | Educate and participate as necessary to ensure financial sustainability.                          |
| MCOs  | Active participation                                      | Willing participation in new payment models.  |
| Patients  | Engagement in care  | Responsible use of medical resources.   |



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## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✔ IPQR Module 3.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

Financial budgeting and reporting is critical in monitoring and maintaining the financial stability of the PPS and its providers. The development of a shared IT infrastructure across the PPS is a major pillar that needs to be built and supported in order for the PPS to be successful, including the accumulation of financial data. This integration of IT will also allow for the reporting of needed financial and budget information across the PPS in an efficient and expedient manner, allowing the financial sustainability to be monitored as well as the flow of DSRIP funding among budget categories, projects and providers. The IT system will include reports, and audit trail information for the finances of the PPS. This will allow the PPS to meet future audit and reporting requirements by the DOH, CMS, and OMIG.

#### ✔ IPQR Module 3.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

AMCH PPS will align its financial management and sustainability progress reporting with the reporting and oversight structures in place for the DSRIP projects. The PMO will be responsible for monitoring progress against project requirements and process measures at a provider level. This information will be shared with the Finance Committee of the AMCH PPS for review and input, and reports will be generated and shared with the PPS Board for review, approval and guidance to the PPS. The success of the financial work stream will be measured by the timeliness of the reporting as set forth in the plan, the accuracy of these reports both internally and to the DOH, the development and implementation of proactive steps to determine financial sustainability, PPS assistance to promote the financial stability of partners, and the communication of this reporting to the partners and community in a timely fashion.

#### IPQR Module 3.9 - IA Monitoring

##### Instructions :



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**Albany Medical Center Hospital (PPS ID:1)**

**Section 04 – Cultural Competency & Health Literacy**

**✅ IPQR Module 4.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| <b>Milestone #1</b><br>Finalize cultural competency / health literacy strategy.   | Completed | This milestone must be completed by 12/31/2015. Cultural competency / health literacy strategy signed off by PPS Board. The strategy should:<br>-- Identify priority groups experiencing health disparities (based on your CNA and other analyses);<br>-- Identify key factors to improve access to quality primary, behavioral health, and preventive health care<br>-- Define plans for two-way communication with the population and community groups through specific community forums<br>-- Identify assessments and tools to assist patients with self-management of conditions (considering cultural, linguistic and literacy factors); and<br>-- Identify community-based interventions to reduce health disparities and improve outcomes. | 05/01/2015          | 12/31/2015        | 05/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | YES |
| <b>Task</b><br>1. AMCH PPS will create a Cultural Competency & Health Literacy Committee (CCHLC) that will include consumer, provider and CBO representation. The CCHLC will follow The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) to establish system-wide guidelines. Building on the comprehensive CNA and survey activities, the CCHLC will approve of developed targeted approaches that address | Completed | 1. AMCH PPS will create a Cultural Competency & Health Literacy Committee (CCHLC) that will include consumer, provider and CBO representation. The CCHLC will follow The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) to establish system-wide guidelines. Building on the comprehensive CNA and survey activities, the CCHLC will approve of developed targeted approaches that address cultural norms and mores, health burden of selected chronic diseases, the role of religious and other community supportive  | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |     |



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| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| cultural norms and mores, health burden of selected chronic diseases, the role of religious and other community supportive services, environmental factors and selected psycho-social issues. The guidelines approved by the CCHLC will be reviewed and approved by the PAC's Clinical and Quality Affairs Committee and the Executive Committee.   |           | services, environmental factors and selected psycho-social issues. The guidelines approved by the CCHLC will be reviewed and approved by the PAC's Clinical and Quality Affairs Committee and the Executive Committee.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>2. In collaboration with high needs community neighborhoods identified in the comprehensive CNA completed in November 2014, AMCH PPS will seek additional community input and will continue to analyze data to identify hot spots where health disparities are the most prevalent. This will allow us to create a framework for identifying areas with the highest need and to target our limited resources in a coordinated approach to address disparities in care that are linked to race, ethnicity, gender, sexual orientation and/or disability.   | Completed | 2. In collaboration with high needs community neighborhoods identified in the comprehensive CNA completed in November 2014, AMCH PPS will seek additional community input and will continue to analyze data to identify hot spots where health disparities are the most prevalent. This will allow us to create a framework for identifying areas with the highest need and to target our limited resources in a coordinated approach to address disparities in care that are linked to race, ethnicity, gender, sexual orientation and/or disability.  | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>3. CCHLC will conduct an assessment of the competency of PPS Provider staff to provide services that are culturally and linguistically appropriate for those they serve. This assessment will be based on a survey of participating providers, input from our consumer and community affairs committee and various community stakeholders, including appropriate CBOs. It will identify where gaps exist and will be informed by material obtained from number 1, above. We will specifically identify the linguistic capabilities at each participating provider site. This assessment will be used to identify providers where cultural competency could be improved. The assessment will identify | Completed | 3. CCHLC will conduct an assessment of the competency of PPS Provider staff to provide services that are culturally and linguistically appropriate for those they serve. This assessment will be based on a survey of participating providers, input from our consumer and community affairs committee and various community stakeholders, including appropriate CBOs. It will identify where gaps exist and will be informed by material obtained from number 1, above. We will specifically identify the linguistic capabilities at each participating provider site. This assessment will be used to identify providers where cultural competency could be improved. The assessment will identify accessibility of appropriate linguistic services and CBO availability to provide these services. | 05/01/2015          | 12/31/2015        | 05/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| accessibility of appropriate linguistic services and CBO availability to provide these services.  |           |  |                     |                   |            |            |                  |                                  |    |
| <p><b>Task</b><br/>4. Building on successful approaches developed by the NYSDOH's AIDS Institute, the CCHLC will approve of customized health literacy tools to assist all participating providers with assessment, engagement, coordination, individualized patient assistance and integration with CBOs and other appropriate partners. The assessment will include patient self-assessment as well as a teach-back approach. Patients with low literacy and/or comprehension will be supported with patient or community navigators. Patient engagement and education materials will be provided in languages that are appropriate, and at a reading level consistent with the patient's ability to comprehend. When this is not feasible, other methods will be employed to engage the patient to be a partner in their care. These tools will be reviewed by the Consumer and Community Affairs Committee and field tested to ensure wide-spread adoption across the disparate geographic area in the PPS.</p> | Completed | 4. Building on successful approaches developed by the NYSDOH's AIDS Institute, the CCHLC will approve of customized health literacy tools to assist all participating providers with assessment, engagement, coordination, individualized patient assistance and integration with CBOs and other appropriate partners. The assessment will include patient self-assessment as well as a teach-back approach. Patients with low literacy and/or comprehension will be supported with patient or community navigators. Patient engagement and education materials will be provided in languages that are appropriate, and at a reading level consistent with the patient's ability to comprehend. When this is not feasible, other methods will be employed to engage the patient to be a partner in their care. These tools will be reviewed by the Consumer and Community Affairs Committee and field tested to ensure wide-spread adoption across the disparate geographic area in the PPS. | 06/01/2015          | 12/31/2015        | 06/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <p><b>Task</b><br/>5. The CCHLC will approve the development of patient and provider materials utilizing outside experts, best practice guidelines and evidence -based approaches. A variety of materials, including web-based learning and other technologies, will be field tested and reviewed with key stakeholders in the community, the Consumer and Community Affairs Committee, AMC's Center for Learning and Development, the PAC's Executive Committee and the PPS. This approach will also be coordinated with various managed care organizations to improve</p>   | Completed | 5. The CCHLC will approve the development of patient and provider materials utilizing outside experts, best practice guidelines and evidence -based approaches. A variety of materials, including web-based learning and other technologies, will be field tested and reviewed with key stakeholders in the community, the Consumer and Community Affairs Committee, AMC's Center for Learning and Development, the PAC's Executive Committee and the PPS. This approach will also be coordinated with various managed care organizations to improve material development and dissemination.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| material development and dissemination.  |           |   |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>6. The CCHLC will work with all participating providers to improve health literacy of our target population. Recognizing that health literacy is more complicated than an assessment of literacy level, various approaches to improve patient comprehension of operating hours, how to access services, including transportation and other identified potential barriers, as well as how and when to communicate with members of their care team, will be developed and disseminated.                             | Completed | 6. The CCHLC will work with all participating providers to improve health literacy of our target population. Recognizing that health literacy is more complicated than an assessment of literacy level, various approaches to improve patient comprehension of operating hours, how to access services, including transportation and other identified potential barriers, as well as how and when to communicate with members of their care team, will be developed and disseminated.                             | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>7. The CCHLC, along with the clinical and administrative leadership of the Project Management Office, will develop multiple strategies to effectively communicate with all providers in the PPS. Organizations participating in the PPS will be required, via contract, to be actively engaged in assessing and improving the cultural competency of their staff. Annual training will be provided by the AMCH PPS regarding knowledge, skills and abilities required to address and improve cultural competence. | Completed | 7. The CCHLC, along with the clinical and administrative leadership of the Project Management Office, will develop multiple strategies to effectively communicate with all providers in the PPS. Organizations participating in the PPS will be required, via contract, to be actively engaged in assessing and improving the cultural competency of their staff. Annual training will be provided by the AMCH PPS regarding knowledge, skills and abilities required to address and improve cultural competence. | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Task</b><br>8. The PPS's Project Management Office, in collaboration with the CCHLC, will develop metrics to evaluate and monitor the impact of the PPS's cultural competency / health literacy initiatives. Based on the initial survey completed in DY1, Q2, which will establish baseline measures, additional qualitative and quantitative measures will be collected across the entire PPS to evaluate progress.   | Completed | 8. The PPS's Project Management Office, in collaboration with the CCHLC, will develop metrics to evaluate and monitor the impact of the PPS's cultural competency / health literacy initiatives. Based on the initial survey completed in DY1, Q2, which will establish baseline measures, additional qualitative and quantitative measures will be collected across the entire PPS to evaluate progress.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |     |
| <b>Milestone #2</b><br>Develop a training strategy focused on addressing the drivers of health disparities   | Completed | This milestone must be completed by 6/30/2016. Cultural competency training strategy, signed off by PPS Board. The strategy should include:   | 05/01/2015          | 06/30/2016        | 05/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | YES |





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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| (beyond the availability of language-appropriate material).   |           | -- Training plans for clinicians, focused on available evidence-based research addressing health disparities for particular groups identified in your cultural competency strategy<br>-- Training plans for other segments of your workforce (and others as appropriate) regarding specific population needs and effective patient engagement approaches   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>1. In collaboration with our PPS's Workforce Coordinating Council, AMC's Center for Learning and Development and based on surveys, the health disparity hot spot list, and other assessments, the CCHLC will approve the use of developed evidence-based cultural competency and health literacy trainings using multiple teaching methods, including web-based approaches, group learning sessions, role play, etc. to engage providers based on the highest identified priority needs. Curricula will be customized for different types of target audiences (e.g. pediatricians vs. CBOs serving adults) and will be refreshed to meet annual updates and training needs of new staff. | Completed | 1. In collaboration with our PPS's Workforce Coordinating Council, AMC's Center for Learning and Development and based on surveys, the health disparity hot spot list, and other assessments, the CCHLC will approve the use of developed evidence-based cultural competency and health literacy trainings using multiple teaching methods, including web-based approaches, group learning sessions, role play, etc. to engage providers based on the highest identified priority needs. Curricula will be customized for different types of target audiences (e.g. pediatricians vs. CBOs serving adults) and will be refreshed to meet annual updates and training needs of new staff. | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>2. The Medical College, AMCH PMO and the CCHLC will finalize a system for web based and in-person trainings to be easily available to participating providers. This system will allow for tracking progress towards completion as well as evaluation of CCHL skill development.  | On Hold   | 2. The Medical College, AMCH PMO and the CCHLC will finalize a system for web based and in-person trainings to be easily available to participating providers. This system will allow for tracking progress towards completion as well as evaluation of CCHL skill development.  | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |    |
| <b>Task</b><br>3. The CCHLC will work with organizational partners in our PPS to identify and engage key leaders in each organization who can be enlisted as champions to encourage active participation from all providers in cultural competency awareness and take proactive steps to address challenges posed by those who resist change or refuse to be engaged. As an added incentive to encourage licensed providers to participate in training, AMCH PPS will provide continuing  | Completed | 3. The CCHLC will work with organizational partners in our PPS to identify and engage key leaders in each organization who can be enlisted as champions to encourage active participation from all providers in cultural competency awareness and take proactive steps to address challenges posed by those who resist change or refuse to be engaged. As an added incentive to encourage licensed providers to participate in training, AMCH PPS will provide continuing  | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| refuse to be engaged. As an added incentive to encourage licensed providers to participate in training, AMCH PPS will provide continuing education credits, where appropriate.   |           | education credits, where appropriate.   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>4. The CCHLC will approve the use of customized curricula to meet the varying needs for staff training and development around cultural competency issues. Building on existing curricula and expert trainers employed by AMC who offer this training throughout the region, AMCH PPS will develop an evidence based approach for training interventions that are effective in improving cultural competency. In-person and web-based training will include criteria to evaluate the success of the training, both in terms of the participants evaluation of the session, and a pre- and post-test evaluation to assess knowledge learned. AMCH PMO will monitor the completion of trainings by all engaged providers, and will provide documentation on completion rates of annual assessments for reporting purposes. | On Hold   | 4. The CCHLC will approve the use of customized curricula to meet the varying needs for staff training and development around cultural competency issues. Building on existing curricula and expert trainers employed by AMC who offer this training throughout the region, AMCH PPS will develop an evidence based approach for training interventions that are effective in improving cultural competency. In-person and web-based training will include criteria to evaluate the success of the training, both in terms of the participants evaluation of the session, and a pre- and post-test evaluation to assess knowledge learned. AMCH PMO will monitor the completion of trainings by all engaged providers, and will provide documentation on completion rates of annual assessments for reporting purposes. | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |    |
| <b>Task</b><br>5. Based on the evaluations generated from step 4, as well as information collected in the CNA, the CCHLC will approve of on going training that can be focused on targeted providers who require further skill development to obtain the necessary competencies to provide care that is culturally and linguistically appropriate. Most of this training will be delivered on site in small groups, based on the identified needs from the pre- and post-test evaluations as well as specific requests from providers who want to improve their skills in this area.   | Completed | 5. Based on the evaluations generated from step 4, as well as information collected in the CNA, the CCHLC will approve of on going training that can be focused on targeted providers who require further skill development to obtain the necessary competencies to provide care that is culturally and linguistically appropriate. Most of this training will be delivered on site in small groups, based on the identified needs from the pre- and post-test evaluations as well as specific requests from providers who want to improve their skills in this area.   | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type | File Name   | Description                                    | Upload Date         |
|---|---------|-----------|---|--|---------------------|
| Finalize cultural competency / health literacy strategy.  | mcintyc | Templates | 1_DY2Q4_CCHL_MDL41_PRES1_TEMPL_Meeting_Schedule_Template_CCHLC_20170331_10167.xlsx  | Meeting Schedule Template CCHLC 20170331       | 04/13/2017 01:40 PM |
|   | mcintyc | Templates | 1_DY2Q4_CCHL_MDL41_PRES1_TEMPL_Training_Schedule_Template_CCHLC_20170331_10166.xlsx | Training Schedule Template CCHLC 20170331.xlsx | 04/13/2017 01:39 PM |
| Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material). | mcintyc | Templates | 1_DY2Q4_CCHL_MDL41_PRES2_TEMPL_Training_Schedule_Template_CCHLC_20170331_10168.xlsx | Training Schedule Template CCHLC 20170331      | 04/13/2017 01:41 PM |

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Finalize cultural competency / health literacy strategy.  |                |
| Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material). |                |

**Milestone Review Status**

| Milestone #         | Review Status   | IA Formal Comments |
|---------------------|-----------------|--------------------|
| <b>Milestone #1</b> | Pass & Complete |                    |
| <b>Milestone #2</b> | Pass & Complete |                    |



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**✔ IPQR Module 4.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 4.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in implementing your cultural competency / health literacy strategy and addressing the specific health disparities you are targeting (based on your CNA), and achieving the milestones described above - including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

There are both challenges and risks involved in the implementation strategy presented in this section. Staff simply do not have the time to participate in face to face training, even though it is necessary to keep them current and improve the competencies they need to provide high quality and culturally and linguistically appropriate care. A second challenge relates to perception. Many providers mistakenly believe that their patients comprehend complex health information, when research proves this is not true. This leads to poor medication adherence, poor rates of retention in care, increased utilization of services that could be avoided and generally poor health outcomes. A third challenge relates to a failure of some service providers to provide culturally and linguistically appropriate care. In general, this occurs for three related reasons: there are very small percentages of patients at most of the suburban and rural sites who are not English speaking which creates disincentives from a business perspective to invest in appropriate services; there is a lack of licensed providers who are bi-lingual; and there are ingrained prejudices and biases based on incorrect assumptions and stereotypes. This negatively impacts many patients and leads to health disparities based on race, ethnicity, sexual orientation and disability. The final and perhaps biggest challenge relates to difficulties in obtaining buy-in. Without a firm commitment from all participating organizations to agree to the need for change, our implementation strategy may not succeed.

To address the lack of time for face to face training, AMCH PMO will make training available via our web portal. This will give us the ability to track who completes the online modules as well as their pre- and post-test scores, which will assist us with evaluation. On site training will still be readily available, but this alternative addresses the lack of time many providers have. Changing perceptions will not be easy. This will be addressed through the training as well as through communication channels to all participating providers. In terms of a failure to provide culturally and linguistically appropriate services, the primary approach to mitigating this risk will be the cultural competency and health literacy training described above. Finally, in terms of organizational and provider "buy-in" AMCH PMO will utilize three approaches. First, we will include requirements in each performance contract that cultural competency and health literacy required training of all staff must occur and be documented no later than year-end. Second, we will identify "champions" in each participating organization who will play an important role in mitigating this risk by helping providers adopt the guidelines promulgated by the CCHLC. Third, over and above the contractual requirements, we will provide incentives to organizations who complete the training early.

#### ✅ IPQR Module 4.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

AMC's cultural competency and health literacy strategy is interdependent with all work streams. Most obvious is its relationship to workforce issues, including staff training, development, recruitment and retention. AMCH PMO will clarify this in the workforce section of this plan. It is also directly linked to contractual issues, funds flow, incentivized payments, clinical and quality affairs, provider and community relations and engagement, consumer affairs and IT systems, including data collection, reporting and analysis. AMC's Project Management Office will oversee



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the activities and provide direction and support to the CCHLC. The Executive Committee of the PAC will provide additional coordination to help ensure member buy-in and commitments necessary to meet domain one milestones. However, there is an additional interdependency that is important to the collaborative regional approach we are pursuing. AMCH PPS will be collaborating with the Alliance for Better Health Care (AFBHC) PPS and the Adirondack Health Institute (AHI) PPS on many of these strategic issues. AMCH PMO is pursuing a strategy of collaboration with these PPSs to make the most efficient use of our limited resources, provide coordinated training and skills development and make it easier for our shared organizational partners to complete requirements once as opposed to three times. This requires careful planning between the three PPSs, which is something that we are currently actively engaged in. It does not mean that identical strategies to address cultural competency and health literacy issues will be created; however, it does mean that training and skills development will be coordinated to avoid duplication.



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**✔ IPQR Module 4.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this workstream and describe what their responsibilities involve.

| <b>Role</b>   | <b>Name of person / organization (if known at this stage)</b> | <b>Key deliverables / responsibilities</b>  |
|---|---|---|
| BHNNY Board   | BHNNY Board   | Approve health literacy/ cultural competency strategy.  |
| BHNNY Cultural Competency and Health Literacy Committee | Tandra LaGrone, Executive Director- In Our Own Voices         | Manage the direction and output of CCHLC; oversee implementation of the BHNNY Cultural Competency / Health Literacy Strategy. |
| AMCH Faculty Physicians Group                           | David Guyett, Director of Training                            | Lead the development of the PPS's cultural competency training & education program.   |
| BHNNY Project Management Office                         | Christine McIntyre  | Lead the development and implementation of the PPS's health literacy campaign.  |
| AMCH's Executive Board Sponsor                          | Ferdinand Venditti, MD, Executive Vice President              | Liaison between the Executive body and the CCHLC.   |



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**✔ IPQR Module 4.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>   | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>                  |
|---|---|---|
| <b>Internal Stakeholders</b>  |   |   |
| Participating PPS providers   | Recipients of educational programs  | Commit to and undertake cultural competency transformation. |
| Contracted CBOs including faith-based organizations                     | Provide assistance in the development and execution of the work stream  | Subject matter expert & patient liaison.                    |
| <b>External Stakeholders</b>  |   |   |
| Patients & Families   | Recipient of improved services; contributor to design of cultural competency / health literacy initiatives through consultation | Feedback on consultations.                                  |
| Adirondack Health Institute and The Alliance for Better Healthcare PPSs | As neighboring PPSs, collaborate regarding identification of training needs as well as the dissemination of materials           | Coordination of training deliverables.                      |





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## DSRIP Implementation Plan Project

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#### ✔ IPQR Module 4.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support the development and implementation of your cultural competency / health literacy strategy and the achievement of the milestones described above.

For the DY1 implementation, we will not have shared IT infrastructure in place across the PPS. However, we will have a web portal that all providers can connect to for web-based learning and pre- and post-test evaluation purposes. For all on site training, data will be collected manually in terms of attendees, course evaluations etc. Initial surveys of community needs will be sent and submitted electronically using current technology and software. By DY2, these processes will be replaced with interoperable IT systems across our network. This will be necessary for our workforce strategy and will require participating providers to use project management software currently being evaluated. Analyzing Salient data and completing risk stratification will allow us to share demographic information about patients across our provider network. AMCH's PMO will then use this information to track the service usage of our priority patient groups (including avoidable admissions, emergency department visits, primary care access, etc.). As care management protocols are developed and rolled out, we will have additional information available in terms of patients' cultural, religious and personal preferences. Sharing this information between providers will allow them to deliver culturally and linguistically appropriate services, and to understand the wider trends in the members utilizing their services. It will also allow our finance committee and PAC executive committee to shift resources, via incentives and other strategies, to participating providers who need to improve skill sets to address DSRIP goals. Finally, patient surveys and focus groups will provide important information needed for us to assess satisfaction and needs identified in terms of our CCHLC strategies. This information will be entered into databases and will be shared with all participating providers, the DOH and the public.

#### ✔ IPQR Module 4.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

As noted above, DY1 will be a year of transition in terms of progress reporting. We will not have interoperable systems in place for every participating provider by year-end. We will, however, have project management software available as well as software to mine claims data to generate all domain one milestones required for reporting purposes. As we build our IT capabilities and capacity in DY1, we will be increasingly able to assess changes in health disparities between different sub-populations. We will continue to be engaged with AFBHC and AHI in terms of joint efforts to update community needs. We will also continue to collaborate and coordinate with the local SHIP-funded group, Healthy Capital District Initiative, to complete updates to identified community needs and the community plan. Improvements in the health literacy of our attributed population will support our achievement of targets for reductions in avoidable emergency visits/ admissions. Specifically, the metrics we will use to monitor the success of our strategies to improve the health literacy of our target populations will be:  
- Avoidable ED and inpatient utilization associated with cultural & socio-demographic groups. This should facilitate our ability to evaluate the



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impact of our CCHLC strategy on the way these groups are accessing and using healthcare services.

- Uptake of practitioner cultural competency training, as captured by post-test evaluation of completed trainings and provider surveys to assess adequacy and utility of training.
- Patient involvement in community engagement initiatives, including focus groups, community forums and consumer affairs.

Success will also be measured by the completion and documentation of the following items: CCHLC meeting minutes and agendas, a finalized health disparity hot spot list, finalized and approved survey for participating providers to assess current skills and knowledge around cultural competency and health literacy, finalized educational materials, trainings and tools for both patients and providers, and the finalized assessment with pre and post test to be completed by all engaged participating providers, as necessary and appropriate. AMCH PMO and the CCHLC will monitor completion rates for annual assessments among providers, and will identify those who need continued skill development trainings. Documentation of trainings completed will be available and will be published to the PMO website and shared as a dashboard indicator. Over time, we will be able to track competency skills among participating providers to determine if education provided has achieved the goal of this committee by improved annual scores on their assessments.

**IPQR Module 4.9 - IA Monitoring**

**Instructions :**



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**Section 05 – IT Systems and Processes**

**✅ IPQR Module 5.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>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).   | Completed | Detailed IT current state assessment. Relevant QEs (RHIOs/HIEs) should be involved in performing this assessment.   | 04/01/2015          | 12/31/2015        | 04/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | NO |
| <b>Task</b><br>1. AMCH Executive Steering Committee (PPS Board) will establish an IT governance body; per the operating guidelines the Technology and Data Management committee (TDMC) will be formed and populated.   | Completed | 1. AMCH Executive Steering Committee (PPS Board) will establish an IT governance body; per the operating guidelines the Technology and Data Management committee (TDMC) will be formed and populated.   | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. AMCH PMO will engage HIXNY and other relevant QEs in assessing information technology capabilities of network providers in data exchange.  | Completed | 2. AMCH PMO will engage HIXNY and other relevant QEs in assessing information technology capabilities of network providers in data exchange.  | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>3. AMCH PMO with the input from the TDMC, will develop a survey to assess the current state of the IT landscape within the PPS. This will include EHR utilization, connectivity, hardware and software infrastructure, security safeguards, staffing expertise, and analytic abilities. | Completed | 3. AMCH PMO with the input from the TDMC, will develop a survey to assess the current state of the IT landscape within the PPS. This will include EHR utilization, connectivity, hardware and software infrastructure, security safeguards, staffing expertise, and analytic abilities. | 05/01/2015          | 09/30/2015        | 05/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>4. AMCH PMO and the TDMC, will review and analyze results of the survey and the   | Completed | 4. AMCH PMO and the TDMC, will review and analyze results of the survey and the QEs to identify gaps including readiness for data sharing and   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| assessment undertaken with the QEs to identify gaps including readiness for data sharing and the implementation of interoperable IT platform(s). These results will constitute the current state assessment and be communicated to the PPS Executive Committee of the PAC, to the PPS Board, and to the PPS providers, and highlight implications of the results. |           | the implementation of interoperable IT platform(s). These results will constitute the current state assessment and be communicated to the PPS Executive Committee of the PAC, to the PPS Board, and to the PPS providers, and highlight implications of the results.   |                     |                   |            |            |                  |                                  |    |
| <b>Milestone #2</b><br>Develop an IT Change Management Strategy.  | Completed | IT change management strategy, signed off by PPS Board. The strategy should include:<br>-- Your approach to governance of the change process;<br>-- A communication plan to manage communication and involvement of all stakeholders, including users;<br>-- An education and training plan;<br>-- An impact / risk assessment for the entire IT change process; and<br>-- Defined workflows for authorizing and implementing IT changes | 04/01/2015          | 03/31/2016        | 04/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |
| <b>Task</b><br>1. The AMCH PMO will define the roles and responsibilities of the TDMC to include development of an IT change management strategy. Once complete the strategy will be approved by the Executive Committee of the PAC and the PPS Board.  | Completed | 1. The AMCH PMO will define the roles and responsibilities of the TDMC to include development of an IT change management strategy. Once complete the strategy will be approved by the Executive Committee of the PAC and the PPS Board.  | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. AMCH's TDMC will engage key stakeholders including end users through surveys and other means to identify training needs across the PPS.   | Completed | 2. AMCH's TDMC will engage key stakeholders including end users through surveys and other means to identify training needs across the PPS.   | 05/01/2015          | 12/31/2015        | 05/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. Based on the identified training needs, the TDMC will collaborate with the WCC and workforce-training vendor to develop a plan to conduct required training as IT changes occur.  | Completed | 3. Based on the identified training needs, the TDMC will collaborate with the WCC and workforce-training vendor to develop a plan to conduct required training as IT changes occur.  | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. AMCH PMO will facilitate change management through effective communication strategies such as conference calls, meetings, targeted training, and one-on-one communication with key stakeholders.  | Completed | 4. AMCH PMO will facilitate change management through effective communication strategies such as conference calls, meetings, targeted training, and one-on-one communication with key stakeholders.  | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| targeted training, and one-on-one communication with key stakeholders.  |           |  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>5. Using the available surveys, gap analysis, and other information, the TDMC will develop a thorough impact/risk assessment for the IT change process needed to implement an effective IT change management strategy. | Completed | 5. Using the available surveys, gap analysis, and other information, the TDMC will develop a thorough impact/risk assessment for the IT change process needed to implement an effective IT change management strategy.   | 12/01/2015          | 03/31/2016        | 12/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>6. The AMCH PMO and the TDMC will work with key stakeholders to define the needed workflows and processes for authorizing and implementing IT changes across the PPS.  | Completed | 6. The AMCH PMO and the TDMC will work with key stakeholders to define the needed workflows and processes for authorizing and implementing IT changes across the PPS.  | 12/01/2015          | 03/31/2016        | 12/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>7. TDMC will develop a monthly monitoring protocol to ensure the success of the IT change management process.  | Completed | 7. TDMC will develop a monthly monitoring protocol to ensure the success of the IT change management process.  | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>8. TDMC will present the change management strategy to the Executive Committee of the PAC and PPS Board for approval prior to dissemination and implementation.  | Completed | 8. TDMC will present the change management strategy to the Executive Committee of the PAC and PPS Board for approval prior to dissemination and implementation.  | 03/01/2016          | 03/31/2016        | 03/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>9. The TDMC and PMO will make the approved IT Change Management Strategy available to the PPS stakeholders including users.  | Completed | 9. The TDMC and PMO will make the approved IT Change Management Strategy available to the PPS stakeholders including users.  | 03/30/2016          | 03/31/2016        | 03/30/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Milestone #3</b><br>Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network  | Completed | Roadmap document, including current state assessment and workplan to achieve effective clinical data sharing and interoperable systems where required. The roadmap should include:<br>-- A governance framework with overarching rules of the road for interoperability and clinical data sharing;<br>-- A training plan to support the successful implementation of new platforms and processes; and<br>-- Technical standards and implementation guidance for sharing and using a common clinical data set<br>-- Detailed plans for establishing data exchange agreements between all providers within the PPS, including care | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
|  |           | management records (completed subcontractor DEAs with all Medicaid providers within the PPS; contracts with all relevant CBOs including a BAA documenting the level of PHI to be shared and the purpose of this sharing).   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>1. The TDMC will define the IT current state including network capability for clinical data sharing and system interoperability in alignment with each of the eleven projects.  | Completed | 1. The TDMC will define the IT current state including network capability for clinical data sharing and system interoperability in alignment with each of the eleven projects.  | 06/01/2015          | 12/31/2015        | 06/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. Concurrently with step 3 of the previous milestone, the TDMC will collaborate with the WCC and workforce-training vendor to develop a plan to conduct required training to support new IT platforms and processes  | Completed | 2. Concurrently with step 3 of the previous milestone, the TDMC will collaborate with the WCC and workforce-training vendor to develop a plan to conduct required training to support new IT platforms and processes.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. The TDMC will work with the Clinical and Quality Affairs committee to define and establish technical standards and implementation guidelines for the use of a common clinical data set based on Domain 1-3 requirements for each of the eleven projects.   | Completed | 3. The TDMC will work with the Clinical and Quality Affairs committee to define and establish technical standards and implementation guidelines for the use of a common clinical data set based on Domain 1-3 requirements for each of the eleven projects.   | 09/01/2015          | 03/31/2016        | 09/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>4. The AMCH PPS PMO will develop contractual language regarding the obligation to seek patient consent to data exchange, as legally required, and agreement by providers to use technical, IT, and clinical data set standards to achieve care coordination and meet project implementation goals. This language will include DEAA compliance, security protections for PHI, and appropriate PHI access for entities such as CBOs. This language will be included in contracts with all providers including CBOs. | Completed | 4. The AMCH PPS PMO will develop contractual language regarding the obligation to seek patient consent to data exchange, as legally required, and agreement by providers to use technical, IT, and clinical data set standards to achieve care coordination and meet project implementation goals. This language will include DEAA compliance, security protections for PHI, and appropriate PHI access for entities such as CBOs. This language will be included in contracts with all providers including CBOs. | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>5. The TDMC and PMO will evaluate participating provider business continuity plans, data privacy controls, and transition plans for   | Completed | 5. The TDMC and PMO will evaluate participating provider business continuity plans, data privacy controls, and transition plans for data integration and connectivity to ensure standards are met and maintained across the PPS.  | 12/01/2015          | 03/31/2016        | 12/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| data integration and connectivity to ensure standards are met and maintained across the PPS.   |           |   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>6. The TDMC will present the final roadmap to the Executive Committee of the PAC for review and approval.   | Completed | 6. The TDMC will present the final roadmap to the Executive Committee of the PAC for review and approval.   | 03/01/2016          | 03/31/2016        | 03/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Milestone #4</b><br>Develop a specific plan for engaging attributed members in Qualifying Entities  | Completed | PPS plan for engaging attributed members in Qualifying Entities, signed off by PPS Board. The plan should include your approach to outreach into culturally and linguistically isolated communities.  | 11/01/2015          | 06/30/2016        | 11/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. AMCH PMO in collaboration with HIXNY will identify the baseline number and percentage of attributed patients who have provided consent for HIXNY data sharing, as well as participating providers in the PPS network connected to HIXNY.   | Completed | 1. AMCH PMO in collaboration with HIXNY will identify the baseline number and percentage of attributed patients who have provided consent for HIXNY data sharing, as well as participating providers in the PPS network connected to HIXNY.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. AMCH PMO will create a PDSA plan for attributed patient engagement that will utilize community navigators and actively engaged CBOs for outreach and educational purposes. This plan will outline strategies for engaging, educating, and facilitating the completion of HIXNY consent forms by the attributed population. | Completed | 2. AMCH PMO will create a PDSA plan for attributed patient engagement that will utilize community navigators and actively engaged CBOs for outreach and educational purposes. This plan will outline strategies for engaging, educating, and facilitating the completion of HIXNY consent forms by the attributed population. | 02/01/2016          | 03/31/2016        | 02/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>3. AMCH PMO in collaboration with the CCHLC will utilize the Community Needs Assessment and other relevant data sources to identify and target patient communities that are culturally and linguistically isolated. A pilot CBO location will be selected to implement the PDSA action plan based on the above findings.      | Completed | 3. AMCH PMO in collaboration with the CCHLC will utilize the Community Needs Assessment and other relevant data sources to identify and target patient communities that are culturally and linguistically isolated. A pilot CBO location will be selected to implement the PDSA action plan based on the above findings.      | 02/01/2016          | 03/31/2016        | 02/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>4. Based on the success of the above mentioned PDSA plan, the AMCH PMO will finalize a PPS-wide plan, including participating providers as well as CBOs, to engage all  | Completed | 4. Based on the success of the above mentioned PDSA plan, the AMCH PMO will finalize a PPS-wide plan, including participating providers as well as CBOs, to engage all  | 04/20/2016          | 06/30/2016        | 04/20/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| wide plan, including participating providers as well as CBOs, to engage all attributed members who have not yet completed a HIXNY consent form identified in previous steps.   |           | attributed members who have not yet completed a HIXNY consent form identified in previous steps.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>5.This plan will be presented to the Executive Committee of the PAC and the PPS Board for review and approval.  | Completed | 5.This plan will be presented to the Executive Committee of the PAC and the PPS Board for review and approval.  | 06/01/2016          | 06/30/2016        | 06/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Milestone #5</b><br>Develop a data security and confidentiality plan.   | Completed | Data security and confidentiality plan, signed off by PPS Board, including:<br>-- Analysis of information security risks and design of controls to mitigate risks<br>-- Plans for ongoing security testing and controls to be rolled out throughout network.  | 07/01/2015          | 03/31/2016        | 07/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |
| <b>Task</b><br>1. The AMCH PMO will collect current data security protocols as well as confidentiality plans of key stakeholder organizations.   | Completed | 1. The AMCH PMO will collect current data security protocols as well as confidentiality plans of key stakeholder organizations.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. The AMCH PMO will enlist the expertise of TDMC participants for best practice sharing in order to align data security plan priorities as necessary.  | Completed | 2. The AMCH PMO will enlist the expertise of TDMC participants for best practice sharing in order to align data security plan priorities as necessary.  | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. AMCH PMO in collaboration with the TDMC, will assess PPS-wide security risks and controls including: information owner, information collection systems, user roles, identity assurance levels for each user and transactions they can perform, documentation of potential consequences for failures, identify assurance impact levels, and sign off. | Completed | 3. AMCH PMO in collaboration with the TDMC, will assess PPS-wide security risks and controls including: information owner, information collection systems, user roles, identity assurance levels for each user and transactions they can perform, documentation of potential consequences for failures, identify assurance impact levels, and sign off. | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. The TDMC will establish and create a centralized data security plan and confidentiality plan to comply with the DEAA and addendum and other state and federal policies, regulations and requirements as they pertain to data   | Completed | 4. The TDMC will establish and create a centralized data security plan and confidentiality plan to comply with the DEAA and addendum and other state and federal policies, regulations and requirements as they pertain to data   | 02/01/2016          | 03/31/2016        | 02/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |





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| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| security, and confidentiality of protected patient information. This will include security testing protocols, controls and standards to mitigate risks for ongoing data security throughout the PPS IT infrastructure. Compliance with policies and procedures will be monitored on an ongoing basis. |           | mitigate risks for ongoing data security throughout the PPS IT infrastructure. Compliance with policies and procedures will be monitored on an ongoing basis.   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>5. AMCH PMO will seek approval of the security policies, assessment and data security and confidentiality plan by the Executive Committee of the PAC; approval of the security and confidentiality plan by the PPS Board.  | Completed | 5. AMCH PMO will seek approval of the security policies, assessment and data security and confidentiality plan by the Executive Committee of the PAC; approval of the security and confidentiality plan by the PPS Board. | 03/01/2016          | 03/31/2016        | 03/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type | File Name  | Description                     | Upload Date         |
|---|---------|-----------|--|---------------------------------|---------------------|
| 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). | mcintyc | Templates | 1_DY2Q4_IT_MDL51_PRES1_TEMPL_Meeting_Schedule_Template-TDMC_and_EHR_10441.xlsx | BHNNY Meeting Schedule Template | 04/17/2017 12:23 PM |
| Develop an IT Change Management Strategy.   | mcintyc | Templates | 1_DY2Q4_IT_MDL51_PRES2_TEMPL_Meeting_Schedule_Template-TDMC_and_EHR_10455.xlsx | BHNNY meeting schedule template | 04/17/2017 01:08 PM |
| Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network   | mcintyc | Templates | 1_DY2Q4_IT_MDL51_PRES3_TEMPL_Meeting_Schedule_Template-TDMC_and_EHR_10456.xlsx | BHNNY meeting schedule template | 04/17/2017 01:09 PM |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). |                |
| Develop an IT Change Management Strategy.   |                |
| Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network   |                |
| Develop a specific plan for engaging attributed members in Qualifying Entities  |                |
| Develop a data security and confidentiality plan.   |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |
| Milestone #3 | Pass & Complete |                    |
| Milestone #4 | Pass & Complete |                    |
| Milestone #5 | Pass & Complete |                    |



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 5.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 5.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in creating and implementing your IT governance structure, your plans for data sharing across your network, your approach to data security and confidentiality, and the achievement of the milestones described above, including the potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

There are several risks to implementation within the IT system and process domain. The sheer number of different vendors, systems, EHRs, protocols, and policies already in place that will need to evolve into one interoperable system will be a challenge. Overlapping PPSs and the complex current state of IT infrastructure will add to the difficulties of creating a centralized IT platform utilized by partnering providers. Extraordinary efforts will need to be made to mitigate these risks and integrate the disparate systems to achieve the goals of DSRIP. Mitigation strategies include leadership buy-in, adequate resourcing, and innovative technological solutions. AMCH PPS has ensured that leadership is engaged at the highest levels of the AMCH structure which will provide authoritative insight into the changes, systems and policies that are involved. IT collaboration with AHI and AFBHC through the ongoing efforts of the KPMG led TOM pilot project may mitigate this risk. Capital funds have also been requested to develop comprehensive technological solutions that will address these risks. The failure to fund these capital projects will place these mitigation strategies in jeopardy.

The AMCH PPS is concerned about the integrity of the data that will be provided from the MAPP System and Salient Interactive Miner. A risk exists regarding the sufficiency of the data that will be provided. AMCH will engage participating providers to assist them in making sure that data in all systems they are responsible for is as accurate and complete as possible.

Another risk that exists is the ability of the State to provide sufficient data in a timely manner. Data is the driver that allows organizations to identify the needed interventions. The State's addition of higher levels of security further restricts the PPS ability to use the data effectively to meet the goals of DSRIP. Without this data, PPS organizations will be restricted in their ability to risk stratify patient level data which can negatively impact projects that will depend on this data for implementation. To mitigate this risk, AMCH PPS will continue to pursue alternative IT solutions outside of the realm of NYS DOH provided data, which will facilitate risk stratification and other data analytics as needed for project implementation.

The current structure and capability of HIXNY to provide data in a useful manner across the spectrum of providers is unclear. The unknown ability of the SHIN-NY to provide a working solution complicates this risk. To mitigate this risk AMCH PPS will work with HIXNY to identify capacity limitations and other potential barriers to timely and meaningful sharing of patient level data to actively engaged patients and participating providers.

Data security is always a risk. Our PPS will engage IT experts from across the PPS both internally and externally to develop PPS security safeguards and policies to mitigate the risk to make sure that available data is shared in an appropriate way with the minimum necessary data being moved through the system.

Each project relies on a successful IT strategy. Failure to provide a comprehensive IT structure capable of supporting PCMH development, care plan sharing, and population health management will impact the ability to achieve the outcome measure targets. Leadership buy-in, adequate staffing, equipment, application architecture, and capital funding all provide mitigation strategies.

#### ✅ IPQR Module 5.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)



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### Albany Medical Center Hospital (PPS ID:1)

The IT work stream is dependent on numerous other work streams including; clinical integration, financial sustainability, practitioner engagement, cultural competency and health literacy, workforce, governance, and population health. Clinical integration is the catalyst between the IT work stream and the project implementation activity required at a provider level. This would also include the ways in which practitioners are engaged in providing IT needs and identifying gaps across the PPS. Clinical integration is dependent upon IT for evaluation, connectivity, data exchange, reporting, care coordination, and quality improvement. Another interdependency between IT and clinical integration will be the need for clinicians to be engaged and provide sufficient feedback for IT to develop a system that will be widely adopted by clinicians across a broad spectrum of providers and provider types.

Financial sustainability has a mutual dependency on IT in that future funding relies upon IT solutions for milestone and metric reporting as well. IT is dependent on finance for the resources required to develop integrated system-wide solutions. IT also influences the roadmap to VBP ensuring sustainability for the endeavor. Finally implementation of the data security and confidentiality plan will mitigate risks to PHI exchanged throughout the PPS. IT security will be included in the IT Security Plan generated by the Financial Sustainability work stream.

IT solutions may be customized to meet member needs.

IT is dependent upon the workforce strategy work stream. As new technologies are developed and implemented, the WCC will work closely with our workforce vendor to ensure appropriate and timely training for all provider types utilizing these systems.

IT is dependent upon the Governance work stream. IT depends upon governance for review, approval, and authority to implement its strategic plan.

Population health is dependent upon IT for data gathering, reporting, and analysis at a dashboard level across the PPS. This information will routinely inform the PPS as it transforms the health of the communities it serves.



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 5.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| <b>Role</b>  | <b>Name of person / organization (if known at this stage)</b>   | <b>Key deliverables / responsibilities</b>  |
|--|---|---|
| BHNNY PMO IT Contact   | Christine McIntyre  | Liaison between IT Representatives of member organizations.   |
| AMCH Security Officer  | Kris Kusche   | AMCH gatekeeper and Director of Data Security.  |
| Privacy Officer  | Noel Hogan  | AMCH Compliance Officer.  |
| AMC EVP CIO & Technology and Data Management Committee Chair | George Hickman  | IT Strategic Development.   |
| AMC VP Information Services                                  | Azmat Ahmad   | Implementation of PPS IT Strategy.  |
| Director of IS, Columbia Memorial Hospital                   | Bonnie Ratliff  | Oversight of PPS IT Strategy.   |
| BHNNY Chief Medical Officer                                  | Kallanna Manjunath, MD  | Clinical integration of IT strategy; HIXNY vice chair board member.   |
| BHNNY Technology & Data Management Committee                 | Lead IT representation from Albany Medical Center Hospital, Columbia Memorial Hospital, Saratoga Hospital, Center for Disability Services & Center for Excellence in Aging & Community Wellness | Oversight of PPS IT Strategy and implementation.  |
| BHNNY Board and PAC Executive Committee                      | BHNNY Board and PAC Executives  | Review and approve IT change management strategy; PPS plan for engaging members in QEs; and data security and confidentiality plan. |



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 5.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>             | <b>Role in relation to this organizational workstream</b> | <b>Key deliverables / responsibilities</b>  |
|-------------------------------------|---|---|
| <b>Internal Stakeholders</b>        |   |   |
| BHNNY                               | Identify and manage resources                             | Executable Strategy and IT infrastructure.  |
| Participating PPS Providers         | Provide insight regarding IT needs                        | Organizational buy-in; implement IT strategy and roadmap.                             |
| <b>External Stakeholders</b>        |   |   |
| Alliance for Better Health Care PPS | Collaborator  | Collaborative efforts; IT TOM Pilot facilitated by KPMG.                              |
| Adirondack Health Institute PPS     | Collaborator  | Collaborative efforts; IT TOM Pilot facilitated by KPMG.                              |
| HIXNY                               | Collaborator & Vendor                                     | Effective, secure health information exchange in support of DSRIP goals.              |
| IT Vendors (TBD)                    | Vendor  | Care management, interoperability, population health & data analytics to support VBP. |



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 5.7 - Progress Reporting**

**Instructions :**

Please describe how you will measure the success of this organizational workstream.

AMCH PPS will use project management reporting and communication tools to monitor the progress towards project specific goals. This project reporting may include: tracking of the IT strategic plan including workforce alignment and training; IT change strategy, and IT budget, documentation of process and workflow demonstrating implementation of EHR across all partners; MU and PCMH level 3- tracking; documentation of patient engagement/ communication system; evidence of use of telemedicine or other remote monitoring services; evidence of implementation of specific workflows. This organizational work stream will be considered successful as it reaches the milestones established in the work plan. Further success will be measured as the IT infrastructure grows and rolls out to meet the needs of the PPS. Further milestones and measures of success will be defined as the project evolves.

**IPQR Module 5.8 - IA Monitoring**

**Instructions :**





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**Albany Medical Center Hospital (PPS ID:1)**

**Section 06 – Performance Reporting**

**☑ IPQR Module 6.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>Establish reporting structure for PPS-wide performance reporting and communication.  | Completed | Performance reporting and communications strategy, signed off by PPS Board. This should include:<br>-- The identification of individuals responsible for clinical and financial outcomes of specific patient pathways;<br>-- Your plans for the creation and use of clinical quality & performance dashboards<br>-- Your approach to Rapid Cycle Evaluation | 04/01/2015          | 03/31/2016        | 04/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |
| <b>Task</b><br>1. AMCH PMO will establish a clinical point of contact as well as a project management point of contact (PMO) responsible for communicating to participating providers regarding specific patient pathways.  | Completed | 1. AMCH PMO will establish a clinical point of contact as well as a project management point of contact (PMO) responsible for communicating to participating providers regarding specific patient pathways.   | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. AMCH PMO will perform a detailed gap analysis of State-provided data via the MAPP tool to determine additional data elements necessary for quarterly reporting.   | Completed | 2. AMCH PMO will perform a detailed gap analysis of State-provided data via the MAPP tool to determine additional data elements necessary for quarterly reporting.  | 04/01/2015          | 09/30/2015        | 04/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>3. AMCH PMO will ensure data security and privacy through contracting, business associate agreements, and data use agreements from all participating providers. We will ensure partner awareness of HIPAA Privacy/ Security Rules and Regulations. | Completed | 3. AMCH PMO will ensure data security and privacy through contracting, business associate agreements, and data use agreements from all participating providers. We will ensure partner awareness of HIPAA Privacy/ Security Rules and Regulations.  | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>4. AMCH PMO will define processes to provide   | Completed | 4. AMCH PMO will define processes to provide access to state provided Medicaid confidential data to PPS Providers   | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| access to state provided Medicaid confidential data to PPS Providers and organizations, and will establish and implement policies and procedures as required by the DEAA Agreement and addendums.  |           | and organizations, and will establish and implement policies and procedures as required by the DEAA Agreement and addendums.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>5. Utilizing commercially available project management software and MAPP tool reporting, AMCH PMO will define and develop PPS-wide performance reporting systems for both clinical and project specific indicators based on standardized care practices and other required Domain 1 metrics.                                    | Completed | 5. Utilizing commercially available project management software and MAPP tool reporting, AMCH PMO will define and develop PPS-wide performance reporting systems for both clinical and project specific indicators based on standardized care practices and other required Domain 1 metrics.  | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>6. AMCH PMO will establish reporting structures for both claims-based and non-claims based metrics.   | Completed | 6. AMCH PMO will establish reporting structures for both claims-based and non-claims based metrics.   | 11/01/2015          | 03/31/2016        | 11/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>7. AMCH PMO will integrate and utilize Salient Interactive Miner, State DSRIP Dashboards, MAPP, and internal PPS-wide performance reporting systems to create dashboards for distribution to the AMCH Executive Steering Committee (PPS Board) and other AMCH PPS governance committees, the PPS, its providers and the public. | Completed | 7. AMCH PMO will integrate and utilize Salient Interactive Miner, State DSRIP Dashboards, MAPP, and internal PPS-wide performance reporting systems to create dashboards for distribution to the AMCH Executive Steering Committee (PPS Board) and other AMCH PPS governance committees, the PPS, its providers and the public.                                     | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Milestone #2</b><br>Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.   | Completed | Finalized performance reporting training program.   | 10/01/2015          | 06/30/2016        | 10/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. AMCH PMO will conduct a complete analysis of PPS organizations to determine training needs on topics such as clinical quality, performance reporting, data for quality improvement, and others as needed. They will then work with partner groups, professional groups and identified leaders from each area of expertise to | Completed | 1. AMCH PMO will conduct a complete analysis of PPS organizations to determine training needs on topics such as clinical quality, performance reporting, data for quality improvement, and others as needed. They will then work with partner groups, professional groups and identified leaders from each area of expertise to help establish appropriate metrics. | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| help establish appropriate metrics.   |           |  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>2. AMCH PMO will develop training materials that address identified needs specifically related to standardized clinical quality measures across PPS.                           | Completed | 2. AMCH PMO will develop training materials that address identified needs specifically related to standardized clinical quality measures across PPS.                           | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>3. AMCH PMO will identify best practices and highlight success stories by presenting them at our quarterly face-to-face PAC meetings to encourage adoption by other providers. | Completed | 3. AMCH PMO will identify best practices and highlight success stories by presenting them at our quarterly face-to-face PAC meetings to encourage adoption by other providers. | 02/01/2016          | 06/30/2016        | 02/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>4. AMCH PMO will roll-out training based on identified metrics to key champion providers. These champions will be compensated for training other PPS Providers.                | Completed | 4. AMCH PMO will roll-out training based on identified metrics to key champion providers. These champions will be compensated for training other PPS Providers.                | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>5. AMCH PMO will evaluate re-training needs and frequency of future trainings based on Workforce Coordinating Council recommendations.   | Completed | 5. AMCH PMO will evaluate re-training needs and frequency of future trainings based on Workforce Coordinating Council recommendations.   | 05/01/2016          | 06/30/2016        | 05/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type | File Name  | Description  | Upload Date         |
|---|---------|-----------|--|--|---------------------|
| Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting. | mcintyc | Templates | 1_DY2Q4_PR_MDL61_PRES2_TEMPL_Training_Schedule_Template_Performance_Reporting_Milestone_2_11290.xlsx | Training Schedule Template Performance Reporting Milestone 2 | 04/21/2017 01:37 PM |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Establish reporting structure for PPS-wide performance reporting and communication.   |                |
| Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting. |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |



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**✔ IPQR Module 6.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✔ IPQR Module 6.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in implementing performance reporting structures and processes and effective performance management within your network, including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

The AMCH PPS has a wide variety of E.H.R. systems as well as a range of HIXNY connectivity. This leads to a unique challenge of implementation to bring all participating organizations up to the same level of readiness to best prepare for performance reporting and training when necessary. Performance report training will need to concurrently run with standardization of clinical protocols. If providers are not fully engaged in the process, they can quickly fall behind and put multiple organizations at risk of not meeting performance goals. Our Clinical and Quality Affairs Committee and PAC Executive Committee will be the critical bodies for overseeing these activities and advancing engagement and on time performance throughout the span of DSRIP. AMCH PPS will also design and rely upon bonus payments based on quality performance and reporting to prompt provider participation, consistent with all regulatory requirements.

An additional risk is related to the lack of data for performance reporting purposes. To mitigate this risk we will provide patient level data to relevant providers. We may also utilize the MAPP tool and other resources to ensure data metrics are available on a quarterly basis. If data is still incomplete or inaccurate due to issues beyond our control, this risks success across the entire PPS network. To mitigate this, we will attempt to create alternative sources of accurate and timely data for performance reporting purposes.

#### ✔ IPQR Module 6.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Our success with Performance Reporting has a significant reliance on IT Systems and Processes, the Executive PAC, as well as our Clinical Performance Team. Clinical performance measures and guidelines will be an important factor in streamlining best practices while meeting important reporting milestones. Our IT infrastructure is also critical to success. While leveraging State provided data, we will also need to incorporate our own IT Systems and protocols across the entire PPS for reporting success. Performance reporting will rely on a streamlined reporting process across the PPS and the availability of data at the patient level. AMCH PPS Security and Privacy Officers will disseminate security and privacy policies and procedures and undertake training and awareness efforts to prompt compliance to protect the confidentiality of shared data. Compliance will also be reinforced by provisions in the partner agreement. PPS organizations will be efficiently trained in data reporting, data management, data privacy, as well as clinical guidelines and protocols. The Executive PAC will review and approve monthly dashboard reports and assess outliers in need of further training.



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**✔ IPQR Module 6.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| <b>Role</b>                                  | <b>Name of person / organization (if known at this stage)</b> | <b>Key deliverables / responsibilities</b>   |
|--|---|--|
| BHNNY Board                                  | Ferdinand Venditti, MD, Executive Vice President              | Oversee performance reporting and performance in PPS projects; approve performance reporting and communications strategies.  |
| BHNNY Project Management Office              | Louis Filhour PhD, RN   | Responsible for oversight and implementation of all 11 projects. This includes performance reporting structure, training, and implementation.  |
| Clinical and Quality Affairs Committee       | Kallanna Manjunath, MD  | Develop or review and approve quality dashboards, and review RCE data and analysis.  |
| Clinical Quality Team Lead                   | James Desemone, MD  | Responsible for identifying or developing standardized clinical protocols and working with project committees and partners to implement protocols across the entire PPS.   |
| Technology & Data Management Committee Chair | George Hickman- TDMC Chair                                    | Provide support, expertise and management for TDMC. Facilitate and support IT implementation and steps to advance IT strategy, data reporting and data sharing to achieve DSRIP goals; facilitate and oversee updates to all IT systems and support overall IT infrastructure. |
| Financial Committee Lead                     | Finance Committee Chair - Fran Albert Spreer                  | Oversee development and implementation of processes and standards for financial performance reporting across the PPS as well as analysis of financial performance.   |
| BHNNY Chief Medical Officer                  | Kallanna Manjunath, MD  | Lead process to develop or forge consensus on and implement standardized clinical care practices to align with reporting requirements and measurement objectives.  |
| Data Analytic Team                           | PMO   | Dashboard, quarterly, milestone and progress reporting for PPS network.  |
| AMCH Compliance Officer                      | Noel Hogan, PhED CPA  | Promote compliance with federal and state privacy laws and oversee implementation of PPS privacy policies for PPS projects and data sharing; implement DEAA privacy requirements; oversee training in data management and data privacy.  |
| AMCH Security Officer                        | Kris Kusche   | Promote implementation of PPS security policies across the provider network in relation to data exchange through HIXNY and other IT platforms used or developed for medical information data exchange.   |



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 6.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>                    | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>   |
|--|---|--|
| <b>Internal Stakeholders</b>               |   |  |
| IT Department                              | Reporting and IT System maintenance   | Overall tech support, IT infrastructure maintenance/troubleshooting, installation and upgrades as necessary.   |
| BHNNY Project Management Office (PMO)      | Provide leadership and direction for all performance reporting functions  | Generate reports for internal and external purposes as required.   |
| AMC Compliance Department                  | Development and implementation of the comprehensive compliance plan   | Develop standardized contract language and monitor provider performance in relation to requirements of the code of conduct.  |
| Finance Department                         | Overall reporting and monitoring responsibility for ensuring that funds are disbursed consistent with financial policies            | Monthly financial reports, desk audit eligibility expense control, payroll distribution, documentation for audit and AP/AR.  |
| BHNNY Board                                | Review and approve performance reporting  | Approve performance reporting and communication strategies.  |
| Participating PPS Providers                | Ensure proper reporting at the provider level   | Generate monthly reports and related PHI as required by project implementation, protocols, and metrics, governance oversight, and contract; communicate data as needed within their own organizations for improvement. |
| AMCH Executive Steering Committee          | Set policy, approve performance reporting and communication strategy, provide liaison to AMC BOD, and oversee activities of the PMO | Approve performance reporting and communication strategies.  |
| Executive (Project Advisory Committee) PAC | Policy-making group and decision-making body  | Responsibility to accept or request revision of clinical standards of care, reporting structures, as well as recognize best practices within the PPS.  |
| <b>External Stakeholders</b>               |   |  |
| NYSDOH                                     | Ensure Medicaid claims data is reported accurately and in a timely manner consistent with regulatory reporting requirements         | Quality data for the PPS to analyze at the patient level in real time.   |





# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✔ IPQR Module 6.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support your approach to performance reporting.

Initially we will need to utilize existing IT infrastructures within our PPS, including but not limited to, E.H.R. systems, Care Management software, and population health registries, as well as Salient Interactive Miner, DSRIP Dashboards, and the MAPP tool for performance reporting purposes. We will utilize state provided templates to facilitate early DSRIP reporting. Our IT team will work closely with our Clinical and Quality Affairs Committee to help streamline reporting needs and ultimately implement and utilize a robust reporting system across the entire PPS. We will also leverage IT support staff to ensure any technical glitches or vital data errors are addressed in real time to avoid delays in reporting. Ultimately we understand the importance of one comprehensive system in order to streamline reporting across the entire PPS Network. We will work within the MAPP CIO Steering Committee in order to move this process forward and to help create a single point of data across our network. We will establish and maintain an AMCH DSRIP Support IT Team to address any questions from partnering providers once this system is in place. We will also utilize commercially available software for project management activities including the creation of progress reports for internal and external purposes.

#### ✔ IPQR Module 6.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

AMCH's PPS will collect performance data electronically from all participating providers on a quarterly basis to measure provider performance. AMCH will be assisted by project management software for this purpose. Evaluations will be administered prior to project implementation along with definitive project goals, and producing a gap-analysis which will be used to evaluate success of project performance. Additional documentation related to training programs will be provided to demonstrate up-take of training and completion rates. Success of this metric will be measured by the total number of participants that receive training or re-training. Timely reporting, as set forth in the plan, will be used as an achievement indicator in this organization work stream. We will also monitor access and usage of state-provided data by PPS providers and organizations as evidence that the providers are utilizing the data as a baseline for their gap-analysis upon approval of the PPSs data security plan by the NYSDOH. Specific gaps that are identified in the project plans will be monitored on an ongoing basis and reported on at least quarterly. To assist the community and to demonstrate transparency, documents and recorded sessions will be available on our public domain website for review. To the extent possible, we will also provide documented summaries of meetings between our PPS and the overlapping PPSs to demonstrate our efforts to collaborate and cooperate on various initiatives.

#### IPQR Module 6.9 - IA Monitoring



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**Instructions :**



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**Albany Medical Center Hospital (PPS ID:1)**

**Section 07 – Practitioner Engagement**

**IPQR Module 7.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name  | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>Develop Practitioners communication and engagement plan.                            | Completed | Practitioner communication and engagement plan. This should include:<br>-- Your plans for creating PPS-wide professional groups / communities and their role in the PPS structure<br>-- The development of standard performance reports to professional groups<br>--The identification of profession / peer-group representatives for relevant governing bodies, including (but not limited to) Clinical Quality Committee   | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           | NO |
| <b>Task</b><br>1. Appoint AMCH PPS 'Practitioner Champions'  | Completed | 1. Appoint AMCH PPS 'Practitioner Champions' to represent:<br>o Key professional groups (physicians, nurses, behavioral health specialists, community health workers etc.)<br>o Geographic areas (Albany, Saratoga, Warren, Columbia, and Greene Counties)<br>o This group will represent the interests and views of practitioners to the PAC Executive Committee and represent the Executive Committee's views to the various communities of practitioners. The Practitioner Champions will take an active role in the design and implementation of new clinical systems required for providing effective patient care and achieving positive health outcomes. The Champions of the practitioner groups will sit on the Clinical and Quality Affairs Committee and will be the leads for their respective professional peer groups. | 06/01/2015          | 09/30/2015        | 06/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. Clinical and Quality Affairs Committee will develop a draft communication and engagement | Completed | 2. Clinical and Quality Affairs Committee will develop a draft communication and engagement plan, including:   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| plan.   |           | <ul style="list-style-type: none"> <li>o Structures and processes for two-way communication between front-line practitioners and the Governance of the PPS – using the Practitioner Champions as a key line for this communication.</li> <li>o Processes for managing grievances transparently, rapidly and effectively.</li> <li>o High-level approach to the use of learning collaborative.</li> <li>o Other forums for practitioners to discuss, collaborate, and shape how DSRIP will affect their practices.</li> </ul> |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>3. As part of the development of the plan, a consultation process will be established with Practitioner Champions regarding a communication/engagement strategy and their role in the DSRIP transformative process.  | Completed | 3. As part of the development of the plan, a consultation process will be established with Practitioner Champions regarding a communication/engagement strategy and their role in the DSRIP transformative process.  | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>4. Build out practitioner support services designed to help practitioners and healthcare organizations evaluate their operations in anticipation of needed changes.  | Completed | 4. Build out practitioner support services designed to help practitioners and healthcare organizations evaluate their operations in anticipation of needed changes.  | 09/01/2015          | 09/30/2015        | 09/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>5. Present finalized practitioner communication and engagement plan to the PAC Executive Committee and the PAC for approval.   | Completed | 5. Present finalized practitioner communication and engagement plan to the PAC Executive Committee and the PAC for approval.   | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Milestone #2</b><br>Develop training / education plan targeting practitioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.  | Completed | Practitioner training / education plan.  | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | NO |
| <b>Task</b><br>1. Working in collaboration with the clinical and administrative leadership at participating organizations, identify "Practitioner Champions" at each organization and professional group. These identified Champions will be "appointed" based on contractual execution with funded participating provider organizations. | Completed | 1. Working in collaboration with the clinical and administrative leadership at participating organizations, identify "Practitioner Champions" at each organization and professional group. These identified Champions will be "appointed" based on contractual execution with funded participating provider organizations.   | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Task</b><br>2. Educate Practitioner Champions and organizational leadership on core goals of DSRIP, potential benefits of participation, AMCH PPS project objectives and quality improvement initiatives. Other potential elements of the training program include; achieving the IHI Triple AIM, improving patient care experience, improving population health, reducing per capita costs, and developing patient-centered care delivery models. Finally the education module will address DSRIP project delivery components including VBP, case management, and clinical integration. | Completed | 2. Educate Practitioner Champions and organizational leadership on core goals of DSRIP, potential benefits of participation, AMCH PPS project objectives and quality improvement initiatives. Other potential elements of the training program include; achieving the IHI Triple AIM, improving patient care experience, improving population health, reducing per capita costs, and developing patient-centered care delivery models. Finally the education module will address DSRIP project delivery components including VBP, case management, and clinical integration. | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. Leverage Practitioner Champions in collaboration with the Workforce Coordinating Council to identify the educational needs of practitioners and staff and develop an appropriate training/education plan. This plan will include core goals, financial expectations and transformation, clinic operational assessment and efficiency, action steps for the 11 DSRIP projects, clinical accountability, and performance data reporting and evaluation.   | Completed | 3. Leverage Practitioner Champions in collaboration with the Workforce Coordinating Council to identify the educational needs of practitioners and staff and develop an appropriate training/education plan. This plan will include core goals, financial expectations and transformation, clinic operational assessment and efficiency, action steps for the 11 DSRIP projects, clinical accountability, and performance data reporting and evaluation.   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. Identify one organization to pilot the training module utilizing the PDSA approach to test the effectiveness of the training plan.  | Completed | 4. Identify one organization to pilot the training module utilizing the PDSA approach to test the effectiveness of the training plan.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>5. The PAC Executive Committee will approve a final training plan to engage practitioners across the PPS in understanding the key goals and deliverables of DSRIP over its 5 year duration.  | Completed | 5. The PAC Executive Committee will approve a final training plan to engage practitioners across the PPS in understanding the key goals and deliverables of DSRIP over its 5 year duration.  | 10/30/2015          | 12/31/2015        | 10/30/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>6. Encourage practitioner organizations to share PPS objectives with their consumers and solicit feedback.   | Completed | 6. Encourage practitioner organizations to share PPS objectives with their consumers and solicit feedback.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Task</b><br>7. Make appropriate modifications to the plan and train additional practitioners and staff providing care at remaining participating practitioner organizations.  | Completed | 7. Make appropriate modifications to the plan and train additional practitioners and staff providing care at remaining participating practitioner organizations.  | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>8. Implement a PDSA approach to obtain necessary feedback from the participants and make appropriate changes to the training model.   | Completed | 8. Implement a PDSA approach to obtain necessary feedback from the participants and make appropriate changes to the training model.   | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>9. Submit quarterly report to CQAC with the information on the description of the training programs delivered, participant-level data, participant feedback and proposed changes to the plan and training outcomes. | Completed | 9. Submit quarterly report to CQAC with the information on the description of the training programs delivered, participant-level data, participant feedback and proposed changes to the plan and training outcomes. | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type | File Name   | Description   | Upload Date         |
|---|---------|-----------|---|---|---------------------|
| Develop Practitioners communication and engagement plan.  | mcintyc | Templates | 1_DY2Q4_PRCENG_MDL71_PRES1_TEMPL_Meeting_Schedule_Template_1.1.2017-3.31.2017_13541.xlsx              | Meeting Schedule Template 1.1.2017-3.31.2017              | 04/27/2017 08:38 AM |
| Develop training / education plan targeting practitioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. | mcintyc | Templates | 1_DY2Q4_PRCENG_MDL71_PRES2_TEMPL_Training_Schedule_Template_-_Pract_Eng_1.1.2017-3.31.2017_13542.xlsx | Training Schedule Template - Pract Eng 1.1.2017-3.31.2017 | 04/27/2017 08:39 AM |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Develop Practitioners communication and engagement plan.  |                |
| 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. |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 7.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found





# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 7.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the current level of engagement of your physician community in the DSRIP program and describe the key challenges or risks that you foresee in implementing your plans for physician engagement and achieving the milestones described above. Describe any potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

The primary risk to the implementation of the practitioner engagement strategy is the practitioners' ability to take an active role in the design and development of the strategy. Factors that may hinder their participation include availability of protected time away from direct patient care, lack of needed institutional support for their engagement, unwillingness to change their practice pattern and previous experience with the local healthcare initiatives. To mitigate the risk, we will:

- Engage appropriate key stakeholders from senior clinical and administrative leadership to get their buy-in, commitment and identify interested Practitioner Champions from their organizations to participate in the implementation of the strategy.
- Structure training programs to meet the needs of the practitioners working in small and large practices.
- Work to align financial incentives available to the practices with their ability and willingness to assist the PPS with the implementation of this strategy.
- Provide free continuing education credit for course completion consistent with standards as an incentive to providers.
- Provide support, both technical and financial, to assist with the transition to value based purchasing.
- Serve as a link to facilitate coordination and collaboration between CBOs and providers at the practice and hospital level

The second risk is our partners' ability to develop ongoing trainings within their practices and organizations to orient and train new staff when they are recruited to support the initiatives. Our Workforce Transformation Strategy involves significant redeployment and recruitment of new staff who will need to be trained on their role in the redesigned model of care. The approach will ensure that the core behaviors and practices of our DSRIP program remain embedded within organizations. To mitigate this risk, we will:

- In collaboration with the Workforce Coordinating Council, utilize Practitioner Champions to identify staff who will be involved in a 'train the trainer' approach as part of the training and education program.
- Develop electronic and printed training materials that will continue to engage practitioners and staff in the DSRIP program.

The third risk is the potential for resistance to changes in clinical pathways and new ways of working. Managing this risk is the core role of the 'Practitioner Champions' including key specialists who are part of our PPS. Key elements of our approach to addressing this issue include:

- Evidence-based change – in all of our communications about the overarching DSRIP program, the specific projects and initiatives we are undertaking, we will articulate the evidence base case studies of similar successful initiatives. We believe this will be particularly powerful when the case studies are from New York State, so we intend to use the MRT Innovation exchange (MIX) platform to identify examples of best practice.
- University at Albany School of Public Health will evaluate practitioner engagement strategies to help identify what works best in adopting new ways of working and overcoming cultural resistance.

#### ✅ IPQR Module 7.4 - Major Dependencies on Organizational Workstreams



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**Albany Medical Center Hospital (PPS ID:1)**

**Instructions :**

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

This work stream is interdependent with nearly every other work stream; however, the biggest interdependency is with clinical integration.

- All affected practitioners must be engaged in the DSRIP process in order for them to value – and support – the clinical integration of our PPS. To ensure coordinated efforts in these two areas, some of the core elements of our approach to practitioner engagement and clinical integration, including the development of professional peer groups and teams, play a central role in the implementation of the practitioner engagement strategy.
- The role of the Practitioner Champions is central to our plans for practitioner engagement. It is important that they are able to play the role we intend them to play in the governance structure – advocating to the Executive Body on behalf of the practitioners they represent and communicating information back down to those practitioners effectively. To this end, our practitioner engagement is dependent on an effective governance structure and processes.
- Our plans for practitioner engagement depend on effective, rapid and easy-to-access communications tools. We intend to use the MIX platform to facilitate communication and best practice sharing between practitioners working in different provider organizations.
- The success of practitioner engagement depends on timely and accurate information and is therefore linked to our strategies in information and data management, which include reports on trainings completed, pre and post test evaluations and the formal adoption of best practice guidelines, etc.
- Practitioner engagement is also linked to appropriate incentives such as freeing up time for training and other purposes by compensating organizations for lost revenue and improved performance.
- In collaboration with neighboring PPSs and with the workforce training and development strategy, practitioner engagement is dependent upon successful training of the workforce.



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**✔ IPQR Module 7.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| <b>Role</b>                            | <b>Name of person / organization (if known at this stage)</b>   | <b>Key deliverables / responsibilities</b>   |
|--|---|--|
| Clinical and Quality Affairs Committee | Committee members   | Develop clinical communication and practitioner engagement plan.   |
| BHNNY Chief Medical Officer            | Kallanna Manjunath, MD  | Clinical and Quality plan development: Practitioner engagement, staff training, and care management protocols.   |
| BHNNY Project Management Office (PMO)  | Louis Filhour PhD, RN   | Responsible for oversight and implementation of all 11 projects. Facilitate the implementation of the operational objectives of the practitioner engagement plan.                        |
| Practitioner Steering Committee        | Practitioner champions representing participating organizations | Take an active role in practitioner engagement and staff buy-in at participating organizations.  |
| BHNNY Clinical Director                | Tara Foster, RN, MS   | Facilitate implementation of the clinical objectives of the practitioner engagement plan and act as a liaison between clinical support staff and Clinical and Quality Affairs committee. |
| BHNNY BH Clinical Director             | Brendon Smith, PhD.   | Facilitate engagement of PPS Behavioral health practitioners and act as a liaison between BH practitioners and Clinical and Quality Affairs committee.                                   |
| Behavioral Health Providers            | Victoria Balkoski, MD   | Facilitate Behavioral Health Provider engagement and integration on behalf of the AMC Faculty Practice and affiliated BH providers across the network.                                   |
| Workforce Coordinating Council         | John Delgrosso  | Work in collaboration with workforce vendor to develop and provide training.   |
| PAC Executive Committee and PAC        | PAC Executive Committee   | Review and approve the clinical communication and engagement plan.   |



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**✔ IPQR Module 7.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>   | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>   |
|---|---|--|
| <b>Internal Stakeholders</b>  |   |  |
| Ferdinand Venditti, MD, Executive Vice President                        | Executive Steering Committee Leadership   | Project oversight and risk remediation.  |
| James Desemone, MD  | Director of Quality Improvement   | Manage efforts of the quality subcommittee under the direction of the DSRIP Medical Director.      |
| Victoria Balkoski, MD   | Leadership within the Department of Psychiatry and across affiliated BH providers                                     | Active engagement of key physician staff in the Department of Psychiatry and affiliated providers. |
| All BHNNY Practitioners   | Participants  | Engage in AMCH PPS projects, action plans and deliverables.  |
| Community-Based BHNNY Behavioral Health Providers                       | Participants  | Engage in AMCH PPS projects, action plans and deliverables.  |
| Medical Directors or designees from PPS Member organizations            | Site champions for practitioner engagement  | Engage providers at their institutions in transformational efforts.                                |
| <b>External Stakeholders</b>  |   |  |
| HIXNY   | RHIO  | Promote and enhance interconnectivity across PPS practitioner organizations.                       |
| Professional Organizations (MSSNY, NYSNA, etc.)                         | Outreach  | Promote DSRIP goals and objectives.  |
| Labor Unions  | Provide needed input and guidance   | Assistance as needed to ensure PPS includes appropriate levels of input from workforce.            |
| Healthy Capital District Initiative (HCDI)                              | Coordinate training needs with PHIP and SHIP  | Coordinated curriculum and training schedule.  |
| Adirondack Health Institute and The Alliance for Better Healthcare PPSs | As neighboring PPSs, collaborate regarding identification of training needs as well as the dissemination of materials | Coordination of training deliverables.   |
| Patients and Families   | Recipient of improved services  | Feedback on access to clinical services  |
| Workforce training Vendor   | Coordinating development of training plan   | Provision of training including evaluation of outcomes.  |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✔ IPQR Module 7.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

- Easy, accessible communication platforms to support communication between practitioners will be important for engaging them in DSRIP and for the sharing of best practice. This is true both within the AMCH PPS and between PPSs. We intend to develop a specific AMCH PPS portal on the MIX platform, potentially with sub-groups for various professional groups and for practitioners interested in specific projects.
- The ability for providers to share clinical information easily will also be important, not just for the improvements in clinical integration but also for the ongoing buy-in of individual practitioners. Therefore, it is important that the IT infrastructure, developed by the AMCH PPS IT Transformation Group, is in place quickly and developed with the input of Practitioner Champions.
- Improved IT infrastructure will also be important for the delivery of our practitioner engagement education and training materials. Our interactive provider map will give us insight into the provider organizations / sites where this will be a challenge.
- Successful electronic connections between provider groups will support practitioner engagement activities.

#### ✔ IPQR Module 7.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

- The roll-out and attendance at the practitioner engagement programs will be an indicator of the reach of our practitioner engagement plan. We have set the target of delivering education & training face-to-face at 65% of provider organizations in our network and we will use this metric to monitor the progress of this work stream.
- In addition, we will monitor the attendance at practitioner training events. The design of these programs (DY1, Q4) will involve specific targets being set for the number of attendees per training, as well as questionnaires pre and post testing designed to assess impact (designed in collaboration with our Workforce Coordinating Council). Our Practitioner Champions will be responsible for generating interest and involvement in these training programs
- The use of our practitioner discussion forums on the MIX platform will be another indicator of the level of engagement of practitioners in the DSRIP program. The group representatives will report regularly to the Clinical & Quality Affairs Committee on the level of engagement (and coordination and integration) they see amongst the group they represent.
- The PPS will conduct annual surveys of provider satisfaction using standardized survey instruments through the National Research Corporation.
- Finally, practitioner engagement will be reported electronically based on the use of SAKAI which will capture time spent in module completion including pre and post test scores as surrogate measures.



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**Albany Medical Center Hospital (PPS ID:1)**

**IPQR Module 7.9 - IA Monitoring**

**Instructions :**



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**Albany Medical Center Hospital (PPS ID:1)**

**Section 08 – Population Health Management**

**✅ IPQR Module 8.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>Develop population health management roadmap.  | Completed | Population health roadmap, signed off by PPS Board, including:<br>-- The IT infrastructure required to support a population health management approach<br>-- Your overarching plans for achieving PCMH 2014 Level 3 certification in relevant provider organizations<br>--Defined priority target populations and define plans for addressing their health disparities. | 04/01/2015          | 06/30/2016        | 04/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. AMCH PPS will conduct a detailed survey of participating providers to assess available data sets and registries. This survey will be used to evaluate potential disparities in care, quality indicators, patient demographics, and social determinants of health. | Completed | 1. AMCH PPS will conduct a detailed survey of participating providers to assess available data sets and registries. This survey will be used to evaluate potential disparities in care, quality indicators, patient demographics, and social determinants of health.  | 04/01/2015          | 12/31/2015        | 04/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. Based on available data sets, AMCH PPS will create the framework for a population health dashboard for public reporting purposes. This framework will be reviewed and approved by the PAC Executive Committee.  | Completed | 2. Based on available data sets, AMCH PPS will create the framework for a population health dashboard for public reporting purposes. This framework will be reviewed and approved by the PAC Executive Committee.   | 10/01/2015          | 06/30/2016        | 10/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>3. AMCH PPS will collaborate with overlapping PPSs to create a detailed plan to maintain the regional comprehensive CNA. Updates to the CNA will be released as circumstances dictate.   | Completed | 3. AMCH PPS will collaborate with overlapping PPSs to create a detailed plan to maintain the regional comprehensive CNA. Updates to the CNA will be released as circumstances dictate.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b>   | Completed | 4. Based on the approved dashboard framework, AMCH PMO  | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| 4. Based on the approved dashboard framework, AMCH PMO will update the dashboard quarterly for the PPS and the public. This dashboard will be available electronically.  |           | will update the dashboard quarterly for the PPS and the public. This dashboard will be available electronically.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>5. AMCH PPS will establish a regional learning collaborative for PCMH certification training and technical support to assure all safety net provider sites are 2014 Level 3 certified by end of DY3.  | Completed | 5. AMCH PPS will establish a regional learning collaborative for PCMH certification training and technical support to assure all safety net provider sites are 2014 Level 3 certified by end of DY3.  | 01/01/2016          | 03/31/2016        | 01/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>6. AMCH PMO will define hotspot areas based on current CNA data. Hotspots will create targeted areas for PPS resource deployment including workforce.   | Completed | 6. AMCH PMO will define hotspot areas based on current CNA data. Hotspots will create targeted areas for PPS resource deployment including workforce.   | 10/01/2015          | 03/31/2016        | 10/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>7. AMCH PPS's Clinical and Quality Affairs Committee will establish Population Health goals that reflect the State of New York Prevention Agenda (PHIP, SHIP, CHIP etc.) and address disparities in care.   | Completed | 7. AMCH PPS's Clinical and Quality Affairs Committee will establish Population Health goals that reflect the State of New York Prevention Agenda (PHIP, SHIP, CHIP etc.) and address disparities in care.   | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>8. AMCH PPS Consumer and Community Affairs Committee and Cultural Competency and Health Literacy Committee will jointly finalize the population health roadmap. It will be presented to the PAC Executive Committee and to the AMCH Executive Steering Committee (PPS Board). | Completed | 8. AMCH PPS Consumer and Community Affairs Committee and Cultural Competency and Health Literacy Committee will jointly finalize the population health roadmap. It will be presented to the PAC Executive Committee and to the AMCH Executive Steering Committee (PPS Board).                 | 06/01/2016          | 06/30/2016        | 06/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Milestone #2</b><br>Finalize PPS-wide bed reduction plan.   | Completed | PPS Bed Reduction plan, signed off by PPS Board. This should set out your plan for bed reductions across your network, including behavioral health units/facilities, in line with planned reductions in avoidable admissions and the shift of activity from inpatient to outpatient settings. | 11/01/2015          | 06/30/2016        | 11/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. AMCH Clinical and Quality Affairs Committee will report data for hospital bed utilization, ED visits, and overall bed utilization across the PPS, with particular emphasis on nursing home bed   | Completed | 1. AMCH Clinical and Quality Affairs Committee will report data for hospital bed utilization, ED visits, and overall bed utilization across the PPS, with particular emphasis on nursing home bed utilization (2.a.v).  | 11/01/2015          | 06/30/2016        | 11/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |





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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| utilization (2.a.v).  |           |  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>2. AMCH PMO will publish dashboard reports based on bed utilization.   | Completed | 2. AMCH PMO will publish dashboard reports based on bed utilization.   | 12/01/2015          | 06/30/2016        | 12/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>3. Dashboards will provide guidance to participating Hospitals, Emergency Departments, and Skilled Nursing Facilities to provide decision support to drive strategies to accomplish the goals of DSRIP.            | Completed | 3. Dashboards will provide guidance to participating Hospitals, Emergency Departments, and Skilled Nursing Facilities to provide decision support to drive strategies to accomplish the goals of DSRIP.            | 02/01/2016          | 03/31/2016        | 02/01/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>4. AMCH PMO and Clinical and Quality Affairs Committee will convene to address results form dashboard reports with the goal of beginning to discuss bed-reduction techniques applicable to provider organizations. | Completed | 4. AMCH PMO and Clinical and Quality Affairs Committee will convene to address results form dashboard reports with the goal of beginning to discuss bed-reduction techniques applicable to provider organizations. | 02/01/2016          | 06/30/2016        | 02/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>5. Meet with applicable organizational leadership to identify excess bed capacity and initiate internal process for decertification of selected beds across the PPS.   | Completed | 5. Meet with applicable organizational leadership to identify excess bed capacity and initiate internal process for decertification of selected beds across the PPS.   | 05/01/2016          | 06/30/2016        | 05/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>6. Assist with submission of CONs as necessary to complete bed decertification.  | Completed | 6. Assist with submission of CONs as necessary to complete bed decertification.  | 06/01/2016          | 06/30/2016        | 06/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>7. In collaboration with Skilled Nursing Facilities and as part of Project 2.a.v, AMCH PMO will identify potential beds available for decertification.   | Completed | 7. In collaboration with Skilled Nursing Facilities and as part of Project 2.a.v, AMCH PMO will identify potential beds available for decertification.   | 06/01/2016          | 06/30/2016        | 06/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>8. AMCH PMO will finalize a bed reduction plan focused on achieving results in Project 2.a.v and present this plan to the PAC Executive Committee and to the PPS Board for approval.                               | Completed | 8. AMCH PMO will finalize a bed reduction plan focused on achieving results in Project 2.a.v and present this plan to the PAC Executive Committee and to the PPS Board for approval.                               | 06/01/2016          | 06/30/2016        | 06/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name                        | User ID | File Type | File Name  | Description                     | Upload Date         |
|---------------------------------------|---------|-----------|--|---------------------------------|---------------------|
| Finalize PPS-wide bed reduction plan. | mcintyc | Templates | 1_DY2Q4_PHM_MDL81_PRES2_TEMPL_Population_Health_MS2_Mtg_Sched_Template_1.1.2017-3.31.2017_10458.xlsx | BHNNY meeting schedule template | 04/17/2017 01:14 PM |

**Prescribed Milestones Narrative Text**

| Milestone Name                                | Narrative Text |
|---|----------------|
| Develop population health management roadmap. |                |
| Finalize PPS-wide bed reduction plan.         |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |



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**✔ IPQR Module 8.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 8.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in implementing these cross-cutting organizational strategies, including potential impacts on specific projects and, crucially, any risks that will undermine your ability to achieve outcome measure targets.

The first risk to implementation is related to the availability of data. Community needs assessment data is a major source of population health information within the PPS service region. This data is complex and can take time to collect and analyze. To mitigate this risk, we will take a structured approach to data collection and analysis involving appropriate stakeholders. Data will be standardized for presentation to project teams and stakeholders. MAPP tool data as well as other sources may lag and will not be available in real-time. The second risk to implementation is that skilled nursing facilities will not commit to bed decertification and the resulting change in their business model. To mitigate this risk, we will incentivize these providers using DSRIP funds as a transitional tool. Perhaps the most significant risk to implementation of the bed reduction milestone is the lack of capital funding. To mitigate this risk, we will continue to support capital funding requests needed for site renovations.

#### ✅ IPQR Module 8.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The population health work stream is dependent upon the following work streams: Financial Sustainability, Governance, IT Systems and Processes, Workforce, Practitioner Engagement, and Cultural Competency & Health Literacy. This work stream is dependent on Financial Sustainability in several ways: Incentive payments to motivate changes in business models, financial support for participation in the PCMH learning collaborative, transformation of the payment model to a Value Based approach. Governance dependencies revolve primarily around approval of final work products. IT Systems and Processes have numerous dependencies because measurement of population health changes are data and system dependent. Redeployment and retraining of nursing home staff due to bed reductions will create a dependency with the Workforce work stream. This work stream is dependent upon actively engaged practitioners and organizations at key locations including nursing homes. The Cultural Competency and Health Literacy work stream will rely on the output of this work stream to guide their efforts in addressing health disparities.



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**✔ IPQR Module 8.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational work stream and describe what their responsibilities involve.

| <b>Role</b>                            | <b>Name of person / organization (if known at this stage)</b> | <b>Key deliverables / responsibilities</b>  |
|--|---|---|
| Clinical and Quality Affairs Committee | Kallanna Manjunath, MD  | Oversee development of population health roadmap and goals; oversee development or identification and implementation of standardized clinical protocols across the entire PPS network.                |
| Nursing Home Administrators            | Various   | Identification and decertification of beds (2.a.v.) and identification of space for medical village or other alternate use.   |
| AMC VP Information Services            | Azmat Ahmad   | Coordination of IT integration for population health data collection and reporting.   |
| BHNNY Project Management Office        | Louis Filhour, PhD, RN  | Oversight and implementation of all 11 projects. This includes performance reporting structure, training, and implementation. Responsible for identifying areas of focus, and directing team efforts. |
| BHNNY PAC Executive Committee          | Elected representatives                                       | Approve clinical protocols, reporting structures, bed reduction plan, and communication to PPS. The Executive PAC committee will review and approve population health dashboard data as appropriate.  |
| BHNNY Board                            | BHNNY Board   | Approve population health roadmap and bed reduction plan.   |



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**✓ IPQR Module 8.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>                    | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>  |
|--|---|---|
| <b>Internal Stakeholders</b>               |   |   |
| BHNNY Project Management Office            | Project management and oversight on behalf of AMCH  | Dashboard reporting, milestone reporting, coordination of incentive payments and leadership activities to complete the Population health roadmap. |
| AMCH Executive Steering Committee          | Commit resources, set policy, direct efforts of the PMO, and provide institutional leadership for internal activities   | Approve the roadmap prior to review and approval by the Executive committee of the PAC and the PPS Board.   |
| AMC IT Department                          | Coordinate IT systems development, reporting systems, and data security. Work with identified vendors to establish population health monitoring IT infrastructure | Integrated systems for monitoring and reporting of population health measures.  |
| Skilled Nursing Facilities                 | Identify excess bed capacity for decertification and retrofitting   | Updated Certificate of Need   |
| <b>External Stakeholders</b>               |   |   |
| Healthy Capital District Initiative (HCDI) | Assist with updating and maintaining the Community Needs Assessment   | Updated CNA   |
| MCOs                                       | Provide technical and data analytic assistance in the development of population health strategies.  | Population health strategies  |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

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#### ✓ IPQR Module 8.7 - IT Expectations

##### Instructions :

Please describe the current Population Health Management IT capabilities in place throughout your PPS network and what your plans are at this stage for leveraging these capabilities and/or developing new IT infrastructure.

Population Health Management is data driven and highly dependent on IT. We will conduct a detailed survey of participating providers to assess available data sets and registries. This survey will be used to evaluate potential disparities in care, quality indicators, patient demographics, and social determinants of health. Community health indicators, available from state, federal and various foundation sources will be utilized to provide baseline measures and longitudinal monitoring of these indicators over the term of the project. Current IT infrastructure does not support robust population health management, monitoring or reporting. IT systems will need to be developed to support population health management activities, including the creation of dashboards. These dashboards will also include Community Needs Assessment data where relevant. Data will be updated on an ongoing basis and be available across the PPS. This IT infrastructure will be a significant endeavor but will ultimately be necessary for success.

PCMH certification requires use of an E.H.R. All safety net providers will need to implement an E.H.R system within their organization and ensure it meets all Meaningful Use requirements. The PCMH learning collaborative will facilitate this change. AMC's IT staff or the identified vendor will provide support as required.

External IT resources such as HIXNY and SHIN-NY will play a significant role in the development of a sustainable population health IT infrastructure.

#### ✓ IPQR Module 8.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

The two primary work streams associated with population health are the monitoring of the health of the population and the reduction in beds available (specifically nursing home beds for Project 2.a.v). The ability to measure, monitor and report on the health of the population in a consistent, longitudinal way will define success for the first part of this work stream. Positive changes in baseline measures of population health will indicate success in the domain 3 and 4 projects. The PMO will develop population health tools and reports and closely monitor contracting with MCOs. In addition, data provided by the NYSDOH regarding Domain 4 metrics, will be utilized and analyzed longitudinally to determine success of population health initiatives. Further clarification of action steps regarding domain 4 is provided in the project implementation plans for Projects 4.b.i and 4.b.ii.

The second workstream will be measured based on approval of one or more CONs that will result in decertification of SNF beds. The required administrative steps consistent with the CON process will be followed, tracked and reported as indicators of progress during DY2-3. Reporting of



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these workstream activities will be shared with the PAC and will be available to the public via the PMO's public web portal.

**IPQR Module 8.9 - IA Monitoring**

**Instructions :**





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**Section 09 – Clinical Integration**

**IPQR Module 9.1 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

| Milestone/Task Name  | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>Perform a clinical integration 'needs assessment'.  | Completed | Clinical integration 'needs assessment' document, signed off by the Clinical Quality Committee, including:<br>-- Mapping the providers in the network and their requirements for clinical integration (including clinical providers, care management and other providers impacting on social determinants of health)<br>-- Identifying key data points for shared access and the key interfaces that will have an impact on clinical integration<br>-- Identify other potential mechanisms to be used for driving clinical integration | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           | NO |
| <b>Task</b><br>1. Assess internal capabilities to perform a comprehensive clinical integration (CI) needs assessment. If necessary select a vendor to complete the assessment. | Completed | 1. Assess internal capabilities to perform a comprehensive clinical integration (CI) needs assessment. If necessary select a vendor to complete the assessment.  | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>2. Select a validated CI needs assessment tool for review and approval by Clinical and Quality Affairs committee.   | Completed | 2. Select a validated CI needs assessment tool for review and approval by Clinical and Quality Affairs committee.  | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. Obtain approval by Clinical and Quality Affairs committee.   | Completed | 3. Obtain approval by Clinical and Quality Affairs committee.  | 10/20/2015          | 12/31/2015        | 10/20/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>4. Generate a list of potential participating practitioner organizations for distribution of approved tool.   | Completed | 4. Generate a list of potential participating practitioner organizations for distribution of approved tool.  | 10/20/2015          | 12/31/2015        | 10/20/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b>  | Completed | 5. Develop a process for distribution and implementation of  | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |



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| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| 5. Develop a process for distribution and implementation of needs assessment tool.  |           | needs assessment tool.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>6. Distribute CI needs assessment.   | Completed | 6. Distribute CI needs assessment.  | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>7. Collect, aggregate and analyze responses to identify providers' requirements for clinical integration, gaps and CI focus areas.   | Completed | 7. Collect, aggregate and analyze responses to identify providers' requirements for clinical integration, gaps and CI focus areas.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>8. Analyze and identify key data points for shared access and the key interfaces that will have an impact on clinical integration.   | Completed | 8. Analyze and identify key data points for shared access and the key interfaces that will have an impact on clinical integration.  | 12/01/2015          | 12/31/2015        | 12/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Milestone #2</b><br>Develop a Clinical Integration strategy.   | Completed | Clinical Integration Strategy, signed off by Clinical Quality Committee, including:<br>-- Clinical and other info for sharing<br>-- Data sharing systems and interoperability<br>-- A specific Care Transitions Strategy, including: hospital admission and discharge coordination; and care transitions and coordination and communication among primary care, mental health and substance use providers<br>-- Training for providers across settings (inc. ED, inpatient, outpatient) regarding clinical integration, tools and communication for coordination<br>-- Training for operations staff on care coordination and communication tools | 11/01/2015          | 06/30/2016        | 11/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. Perform a current state assessment of participating practitioner organizations' integration capabilities, technology capabilities, care management and care coordination capabilities, quality programs and cultural readiness.   | Completed | 1. Perform a current state assessment of participating practitioner organizations' integration capabilities, technology capabilities, care management and care coordination capabilities, quality programs and cultural readiness.  | 11/01/2015          | 01/31/2016        | 11/01/2015 | 01/31/2016 | 03/31/2016       | DY1 Q4                           |    |
| <b>Task</b><br>2. Based on Clinical Integration(CI) needs assessment, current state assessment, and AMCH PPS projects, develop a draft CI strategy that includes many perspectives including patient populations, practitioners, PPS partners, processes, assessments and care plan protocols, care transitions, technology and data. | Completed | 2. Based on Clinical Integration(CI) needs assessment, current state assessment, and AMCH PPS projects, develop a draft CI strategy that includes many perspectives including patient populations, practitioners, PPS partners, processes, assessments and care plan protocols, care transitions, technology and data.  | 12/01/2015          | 06/30/2016        | 12/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| processes, assessments and care plan protocols, care transitions, technology and data.  |           |  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>3. Working with representatives from participating organizations, develop a component of the CI strategy that outlines the implementation plan with special focus on care transitions including hospital admission and discharge coordination, care transitions, care coordination and communication among primary care and behavioral health practitioners. | Completed | 3. Working with representatives from participating organizations, develop a component of the CI strategy that outlines the implementation plan with special focus on care transitions including hospital admission and discharge coordination, care transitions, care coordination and communication among primary care and behavioral health practitioners. | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>4. As a component of the strategy, working with Technology and Data Management Committee (TDMC) outline, test and verify clinical data sharing process for all relevant clinical interfaces.   | Completed | 4. As a component of the strategy, working with Technology and Data Management Committee (TDMC) outline, test and verify clinical data sharing process for all relevant clinical interfaces.   | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>5. Establish clinical data sharing process.  | Completed | 5. Establish clinical data sharing process.  | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>6. Develop training criteria for participating practitioners across different clinical settings (Incl. ED, inpatient, outpatient) regarding clinical integration, tools and communication for coordination.  | Completed | 6. Develop training criteria for participating practitioners across different clinical settings (Incl. ED, inpatient, outpatient) regarding clinical integration, tools and communication for coordination.  | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>7. Develop training criteria for nursing and operations staff on care coordination and communication tools.  | Completed | 7. Develop training criteria for nursing and operations staff on care coordination and communication tools.  | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>8. Develop protocols for hospital admission and discharge coordination to assure timely and effective care transition.   | Completed | 8. Develop protocols for hospital admission and discharge coordination to assure timely and effective care transition.   | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>9. Develop protocols for care transitions, care coordination and communication among participating primary care and behavioral health practitioners.   | Completed | 9. Develop protocols for care transitions, care coordination and communication among participating primary care and behavioral health practitioners.   | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b>   | Completed | 10. Present draft CI strategy to the Clinical and Quality Affairs  | 01/01/2016          | 06/30/2016        | 01/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| 10. Present draft CI strategy to the Clinical and Quality Affairs committee for review and approval.   |           | committee for review and approval.  |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>11. Obtain approval of clinical integration strategy by Clinical and Quality Affairs committee.   | Completed | 11. Obtain approval of clinical integration strategy by Clinical and Quality Affairs committee.   | 02/01/2016          | 06/30/2016        | 02/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>12. Roll-out plan for CI implementation across participating practitioner organizations in one of the regions within AMCH PPS utilizing the PDSA framework. | Completed | 12. Roll-out plan for CI implementation across participating practitioner organizations in one of the regions within AMCH PPS utilizing the PDSA framework. | 03/01/2016          | 04/30/2016        | 03/01/2016 | 04/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>13. Evaluate the outcomes from the initial roll-out, modify plan if necessary and roll-out to other regions.  | Completed | 13. Evaluate the outcomes from the initial roll-out, modify plan if necessary and roll-out to other regions.  | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>14. Measure and submit quarterly reports to CQA committee on participation rates, training topics and progress on implementation.                           | Completed | 14. Measure and submit quarterly reports to CQA committee on participation rates, training topics and progress on implementation.                           | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name                                     | User ID | File Type | File Name  | Description  | Upload Date         |
|--|---------|-----------|--|--|---------------------|
| Perform a clinical integration 'needs assessment'. | mcintyc | Templates | 1_DY2Q4_CI_MDL91_PRES1_TEMPL_Clinical_Integration_Organizations_to_be_Integrated_1.1.2017-3.31.2017_11285.xlsx | Clinical Integration Organizations to be Integrated 1.1.2017-3.31.2017 | 04/21/2017 01:30 PM |
|  | mcintyc | Templates | 1_DY2Q4_CI_MDL91_PRES1_TEMPL_Clinical_Integration_Meeting_Schedule_1.1.2017-3.31.2017_11284.xlsx               | Clinical Integration Meeting Schedule 1.1.2017-3.31.2017               | 04/21/2017 01:30 PM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name                           | User ID | File Type         | File Name  | Description                                  | Upload Date         |
|--|---------|-------------------|--|--|---------------------|
| Develop a Clinical Integration strategy. | mcintyc | Meeting Materials | 1_DY2Q4_CI_MDL91_PRES2_MM_CI_Training_Sign_in_20170316_11289.pdf                 | CI Training Sign in 20170316                 | 04/21/2017 01:32 PM |
|  | mcintyc | Meeting Materials | 1_DY2Q4_CI_MDL91_PRES2_MM_AMCH_PPS_Care_Plan_20170313_11287.pdf                  | AMCH PPS Care Plan_20170313                  | 04/21/2017 01:31 PM |
|  | mcintyc | Meeting Materials | 1_DY2Q4_CI_MDL91_PRES2_MM_AMCH_DSRIP_CI_CCM_Overview_Training_20170316_11286.pdf | AMCH DSRIP CI_CCM_Overview Training 20170316 | 04/21/2017 01:31 PM |

**Prescribed Milestones Narrative Text**

| Milestone Name                                     | Narrative Text |
|--|----------------|
| Perform a clinical integration 'needs assessment'. |                |
| Develop a Clinical Integration strategy.           |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Complete |                    |
| Milestone #2 | Pass & Complete |                    |



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**✔ IPQR Module 9.2 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✓ IPQR Module 9.3 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges or risks that you foresee in improving the level of clinical integration throughout your network and achieving the milestones described above. Describe potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

A primary risk for clinical integration will be ineffective participation of practitioners and leaders of health care organizations. Currently most practitioners and health systems function as silos and have not changed their systems due to current payment systems, or market share dominance. Without their active participation in our efforts to redesign the delivery system, we will face substantial hurdles in implementing clinical integration strategies effectively. Strong linkages to Level 3 PCMH PCP sites are essential to the success of clinical integration. Inability of the primary care practices to achieve this recognition will create additional hurdles. The current culture among practitioners is a barrier to integration of physical and BH care services. The current lack of integration compromises the care of individuals with mental health and chemical dependency disorders and chronic medical ailments. To mitigate these risks, we will:

- Create teams, led by practicing clinician stakeholders that will be responsible to the CQAC for developing clear lines of accountability and communication between relevant groups, and the development of clinical pathways using evidence-based standards of care and monitoring of clinical performance.
- With a dedicated team of experts, AMCH PPS will coach and support other primary care practitioners through the process of obtaining recognition as a Level 3 PCMH.
- Provide training and encourage a cultural shift across organizational boundaries to create a more collaborative, patient centered approach whereby primary care practitioners are more attentive to behavioral health disorders.
- Assist our partners with the transition towards value based payments and away from traditional payment models.

A second risk to clinical integration is the reliance on new IT and communications infrastructure which is needed to support communication between practitioners and between organizations. The IT and data sharing survey that we carried out prior to our DSRIP application revealed that the partners within our PPS are at differing levels of IT capabilities and are on differing platforms, creating risks to integration. The current lack of infrastructure and reimbursement to support telemedicine prevents implementation as well as readiness of providers to be part of the initiative. Existing IT infrastructure is inadequate to support a region-wide interoperable system, and a comprehensive patient registry. Rolling out new tools for data sharing while trying to establish new lines of communication to coordinate care will be a complex challenge. To mitigate these risks, we will:

- Involve practitioners from our participating partners in the redesign and implementation of clinical IT and data sharing systems.
- Integrate a member of the TDMC into the team to develop our clinical integration strategy.
- Utilize a realistic model of IT expansion to allow all organization types to share in connectivity.
- Develop and implement a system-wide IT solution to facilitate real-time data exchange for effective care management including structured EHR templates.

A third risk is the inability of regional MCOs to reimburse adequately for proposed changes to the delivery system. Their current authorization requirements are not aligned with implementation of clinical pathways and care coordination initiatives. Active engagement in VBP will be difficult to achieve without practitioner engagement and clinical integration. To mitigate these risks, we will:

- Engage MCOs to evolve the payment structure to a value based system as well as provide educational materials to our participating providers.
- Examine clinical pathways and workflows to identify authorizations and procedures required by MCOs and their impact on service delivery.
- Discuss a streamlined process for care bundles with the MCOs to minimize unnecessary authorizations.



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 9.4 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Clinical integration is dependent on the following work streams: Governance, Finance, Workforce, IT, and Practitioner Engagement. These work streams are linked together and supportive of each other. This integration creates processes that are sequential across the various work streams, creating management challenges. Clinical integration is dependent on Governance for the review and approval of the clinical integration strategic plan among other elements. Clinical Integration is dependent upon Finance to establish appropriate incentives for engagement (providers/ organizations/ MCOs) and project implementation. Clinical integration is dependent upon workforce in two ways: first, to address training needs workforce will provide the necessary skill development required, and second, the necessary staffing to meet demand across clinical settings. Clinical integration is dependent upon IT for evaluation, connectivity, data exchange, reporting, care coordination, and quality improvement. Clinical integration is dependent upon practitioner engagement without which the work stream cannot succeed. Clinically integrating AMCH PPS's diverse set of practitioners will require the input, insight, and engagement of all involved. All affected practitioners must be engaged in the DSRIP process in order for them to value – and support – the clinical integration of our PPS. To ensure coordinated efforts in these two areas, some of the core elements of our approach to clinical integration and practitioner engagement – including the development of professional peer groups and teams– also play a central role in the delivery of our clinical integration strategy. To support the development of NCQA-certified Level 3 PCMH primary care practices, the Population Health and the Performance Reporting work streams will need to align with the clinical integration and practitioner engagement strategies.

If the transformation towards a clinically integrated system is viewed by practitioners as increasing the administrative burden involved in managing care for their patients, we will not be able to create a sustainable shift in practice. An important factor in facilitating greater clinical integration will, therefore, be freeing up the time required for individual practitioners to engage in multi-disciplinary care planning. Our IT systems and processes will need to be designed and implemented (a) with the goal of reducing administrative processes from their current levels and (b) with the input of clinical end users.





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**✔ IPQR Module 9.5 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| <b>Role</b>                                     | <b>Name of person / organization (if known at this stage)</b>   | <b>Key deliverables / responsibilities</b>  |
|---|---|---|
| Clinical and Quality Affairs Committee          | Committee members   | Oversight and approval of CI Strategy and CI work plan.   |
| BHNNY Chief Medical Officer                     | Kallanna Manjunath, MD  | Leadership, member of Sr. Management Team, Chief Medical Officer  |
| Practitioner Steering Committee                 | Practitioner champions representing participating organizations   | Take an active role in practitioner engagement, clinical integration and staff buy-in at participating organizations.                           |
| BHNNY Project Management Office                 | Louis Filhour, PhD, RN  | Responsible for oversight and implementation of all 11 projects. Facilitate the implementation of the operational objectives of the CI Strategy |
| BHNNY Clinical Director                         | Tara Foster, RN, MS   | DSRIP wide assistance with adoption of care management protocols  |
| BHNNY BH Clinical Director                      | Brendon Smith, PhD  | DSRIP wide assistance with behavioral health integration, etc.  |
| BHNNY PMO IT Contact                            | Christine McIntyre, MPH   | Liaison between IT Representatives of member organizations.   |
| Executive Sponsor                               | Ferdinand Venditti, MD Executive Vice President   | Assistance with work stream integration, PPS relations and clinical engagement.   |
| AHI and The Alliance for Better Healthcare PPSs | As neighboring PPSs, collaborate regarding identification of training needs as well as the dissemination of materials | Coordination of training deliverables.  |



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**✓ IPQR Module 9.6 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved, both within and outside the PPS.

| <b>Key stakeholders</b>   | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>  |
|---|---|---|
| <b>Internal Stakeholders</b>  |   |   |
| Kallanna Manjunath, MD  | BHNNY Chief Medical Officer and Chair, Clinical and Quality Committee   | Leadership and direction of the Clinical and Quality Affairs Committee, assisting with plans, strategies and protocols, as needed |
| James Desemone, MD  | Albany Medical College's Director of Quality, Faculty Physicians Group  | Leadership efforts for clinical quality improvement at internal and external sites  |
| Ferdinand Venditti, MD Executive Vice President                         | President, AMC Faculty Physicians Group   | Executive Steering Committee leadership, obtaining PCP "buy-in"   |
| AMC Faculty Practice and Affiliated Partners                            | Medical Director of multiple organizations  | Committee participation, clinical leadership across provider sites  |
| Community-Based AMCH PPS Behavioral Health Providers                    | Participants  | Engage in AMCH PPS projects, action plans and deliverables.   |
| Department of Psychiatry  | Behavioral Health Leadership  | Active engagement in clinical integration of primary and behavioral health  |
| Providers   | Medical Director of multiple organizations  | Committee Participation, clinical leadership across provider sites  |
| <b>External Stakeholders</b>  |   |   |
| Accreditation and Certification Agencies                                | Various   | Provide guidelines for accreditation and certification  |
| HIXNY   | RHIO  | Promote and enhance interconnectivity across PPS practitioner organizations   |
| Professional Organizations (MSSNY, NYSNA, etc.)                         | Outreach  | Promote DSRIP goals and objectives  |
| 1199 SEIU, NYSNA, and CSEA  | Provide needed input and guidance   | Assistance as needed to ensure PPS includes appropriate levels of input from workforce  |
| Healthy Capital District Initiative (HCDI)                              | Coordinate training needs with PHIP and SHIP  | Coordinated curriculum and training schedule  |
| Adirondack Health Institute and The Alliance for Better Healthcare PPSs | As neighboring PPSs, collaborate regarding identification of training needs as well as the dissemination of materials | Coordination of training deliverables.  |
| Workforce training Vendor   | Coordinating development of training plan   | Provision of training including evaluation of outcomes  |
| External Membership of Clinical and Quality Affairs Committee           | Various   | Actively engaged in the development of work stream deliverables   |



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#### ✅ IPQR Module 9.7 - IT Expectations

##### Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

Effective clinical integration will require relevant information to be readily accessible for all providers across the patient care spectrum. For some providers this will mean integration into new or expanded clinical data systems. Effective clinical integration will rely heavily on the coordinated use of patient registries and other IT tools. A core element of our clinical integration needs assessment will be identifying whether new, expanded or other data-sharing systems are required. The collaboration between AMCH's PPS Technology and Data Management Committee, the Clinical and Quality Affairs Committee, and the provider stakeholders will be important in ensuring that our plans for developing IT infrastructure across the PPS support better clinical integration. Real time data sharing capability may be the most important thing to ensure in DY1 and DY2, since fully operational IT systems may not be feasible, affordable or able to be built and implemented quickly.

Achieving the buy-in of our participating providers for new technologies will depend on AMCH PPS to provide compelling justification for the use of the new technologies. Realizing partners within our PPS are at differing levels of IT capabilities and are on differing platforms will create a challenge to integration. We will utilize a multi-stage model of IT expansion to allow all organization types to share in connectivity at a realistic rate. This includes:

1. Developing manual reporting via excel or other State provided templates for MAPP tool utilization. A PMO purchased project management software tool will ease the burden of this task.
2. EHR adoption by all safety net primary care providers prior to the end of DY3.
3. Adoption of toolkits produced by the Target Operating Model project, led by KPMG, for IT functionality across the PPS.
4. Utilization of claim based analytic resources for risk stratification to deploy resources and develop provider performance metrics.
5. Develop care planning/ care coordination functionality across the broad spectrum of performing providers.

#### ✅ IPQR Module 9.8 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

The Clinical and Quality Affairs (CQA) committee will receive quarterly progress reports aligned with the phases of implementation of CI Strategy. The first quarterly report will include:

- A validated CI needs assessment tool approved by the CQA committee
- Aggregated results of the CI needs assessment survey
- Progress towards completion of a clinical IT needs assessment
- An approved CI Strategy document

Subsequent quarterly reports may include, but not be limited to:

- Updates on training activities



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- Progress towards implementation of CI action plans
  - Progress towards full implementation of the IT infrastructure development for interoperability
  - Information obtained from surveys of participating practitioners and patient groups.
- The success of clinical integration will be demonstrated by completion of the PMO quarterly progress reports as a surrogate measure. Justification for use of these reports as surrogate measures is based on accurate and timely data provided by participating providers. AMCH PPS has purchased and will utilize performance logic for overall project tracking and reporting.

**IPQR Module 9.9 - IA Monitoring:**

**Instructions :**



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#### Section 10 – General Project Reporting

##### ✅ IPQR Module 10.1 - Overall approach to implementation

###### Instructions :

Please summarize your intended approach to the implementation of your chosen DSRIP projects, including considerations around how this approach will allow for the successful development of concurrently implementing DSRIP projects.

The successful implementation of AMCH PPS's eleven DSRIP projects will require the following:

- 1) The creation of a collaborative and transparent reporting system across all participating providers.
- 2) Executive management and clinical leadership, which are diverse and representative across the region, will be responsible for the implementation of the projects.
- 3) A plan that engages, incentives, and educates providers and the community through the creation of regional hubs.
- 4) The collaboration of AMCH PPS TDMC and CQA and provider stakeholders to ensure development of a sustainable, affordable and realistic plan for regional connectivity by building upon existing platforms and develop short term solutions that will evolve to long term sustainable technology interfaces. Retrieving accurate and timely data from the DOH will be vital to the success of this project.
- 5) Culturally appropriate training designed to educate individuals and organizations about the goals and strategies of each DSRIP project.
- 6) A financial plan that is fair, transparent and sustainable. Many projects will require significant capital investment. Delays in the CRFP program have hampered the ability of some projects to move forward. Failure to receive funding will jeopardize the success of some projects.

The PMO is responsible for meeting the overall timelines and deliverables and the day to day management of activities associated with the eleven DSRIP projects. AMCH recognizes the importance of shared governance as it relates to the success of the individual projects. To accomplish this, AMCH will focus on transparency, clear communication, and collaboration across the entire PPS. The PMO will share information such as best practices and performance benchmarks to ensure that project goals are achieved.

Another component that will drive the success of the eleven DSRIP projects is the creation of a shared information technology infrastructure as well as data analytics. Interoperability must be created to transfer data among providers.

AMCH PPS has developed a Workforce Coordinating Council to assess the capabilities of the DSRIP workforce and provide training and education where needed. Training will be provided to new hires and current employees to meet the needs of project specific milestones.

Provider and community engagement is a key factor contributing to the success of the DSRIP initiative. Since the AMCH PPS is comprised of a diverse mix of hospitals, providers, and community based organizations, AMCH PPS will ensure that all parties are engaged in the process through the efforts of our committees.

AMCH PPS will operate within a budget and funds flow model that evolves to meet the needs of the PPS in order to achieve the goals and objectives of DSRIP.

##### ✅ IPQR Module 10.2 - Major dependencies between work streams and coordination of projects

###### Instructions :



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Please describe how your approach will handle interdependencies between complementary projects, as well as between projects and cross-cutting PPS initiatives - for example, an IT infrastructure upgrade, or the establishment of data sharing protocols.

The AMCH PPS goal is to develop strategies that allow projects with similar milestones to work interdependently creating effective and efficient work streams. Several projects require care coordination. It will be efficient to standardize care coordination protocols.

AMCH PPS comprises a five county area that includes; Albany, Columbia, Greene, Saratoga, and Warren Counties. To avoid redundancies and to allow for seamless coordination of care throughout the PPS, the development plan will include three geographic hubs, and within those hubs creating project specific groupings allowing for more focused effort. Recognizing the regional diversity, the three hubs are: Hub 1: Warren and Saratoga Counties, Hub 2: Albany County, and Hub 3: Columbia and Greene Counties. Providers within a hub will work together on each project. Some examples of provider and project groupings by commonality include: Projects 2.a.iii and 2.b.iii. Both projects share interdependences with the development of care coordination and patient navigation. Projects 3.a.i and 3.a.ii may also be grouped together as they both share behavioral health commonalities.

Multiple projects require that participating providers meet the NCQA Level 3 2014 Patient Centered Medical Home standards. It may not be feasible to group all of the projects that require providers to meet this standard; therefore, the PMO will create a learning collaborative to assist all sites in the certification process.



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**✓ IPQR Module 10.3 - Project Roles and Responsibilities**

**Instructions :**

Please outline the key individuals & organizations that play a role in the delivery of your PPS's DSRIP projects, as well as what their responsibilities are regarding governance, implementation, monitoring and reporting on your DSRIP projects.

| Role   | Name of person / organization (if known at this stage) | Key deliverables / responsibilities   |
|--|--|---|
| BHNNY PMO                                    | Louis Filhour, PhD, RN                                 | PMO is responsible for meeting project milestones and deliverables and providing project quarterly reports to DOH. PMO will be responsible for driving the implementation of those projects. PMO will monitor the implementation of cross-PPS organizational development initiatives, such as IT infrastructure development and workforce transformation. |
| BHNNY Clinical and Quality Affairs Committee | Dr. Kallanna Manjunath, BHNNY Chief Medical Officer    | CQAC will ensure improvements in clinical outcomes through enhanced clinical integration and practitioner engagement across all eleven DSRIP projects.  |



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**✓ IPQR Module 10.4 - Overview of key stakeholders and how influenced by your DSRIP projects**

**Instructions :**

In the below table, please set out who the key stakeholders are that play a major role across multiple DSRIP projects. Please give an indication of the role they play and how they impact your approach to delivering your DSRIP projects.

| <b>Key stakeholders</b>                                 | <b>Role in relation to this organizational workstream</b>   | <b>Key deliverables / responsibilities</b>  |
|---|---|---|
| <b>Internal Stakeholders</b>                            |   |   |
| BHNNY PMO   | Management and coordination of all eleven DSRIP projects  | Responsible for the quarterly reporting of all timelines and deliverables.  |
| BHNNY Audit and Compliance Committee                    | Ensures compliance across eleven DSRIP projects   | Responsible for the development and implementation of the BHNNY Compliance Plan and the development and dissemination of compliance materials for BHNNY.  |
| BHNNY Consumer and Community Affairs Committee          | Ensures active consumer and community engagement across all relevant DSRIP projects                               | Responsible for engaging key CBOs and non-provider organizations in strategic locations to encourage active consumer engagement and participation in the DSRIP projects.                                    |
| BHNNY Finance Committee                                 | Provide financial oversight for all eleven DSRIP projects   | Management of budgeting and financial planning for projects. Create and monitor internal controls and accountability policies.  |
| BHNNY Workforce Coordinating Council                    | Oversee workforce needs of all eleven DSRIP projects  | Assess workforce need and provide training as needed.   |
| BHNNY Technology and Data Management Committee          | Manage the IT work stream   | Implement IT solutions across the network in support of project development.  |
| BHNNY Cultural Competency and Health Literacy Committee | Establish a system-wide approach to ensure culturally and linguistically appropriate services are made available. | Assess cultural and linguistic training needs across the PPS region. Provide materials where necessary.   |
| All BHNNY Participating Providers                       | Project implementation  | Collaborate on the development and implementation of health system transformation including integration of the delivery system.   |
| <b>External Stakeholders</b>                            |   |   |
| Saratoga Hospital                                       | Leadership participant  | Participant in select DSRIP projects.   |
| Columbia Memorial Hospital                              | Leadership participant  | Participant in select DSRIP projects.   |
| Labor Unions  | Labor representation  | Support and implementation of workforce transformations; as these plans are delivered through the implementation of the DSRIP projects BHNNY may engage with them on the specific changes to the workforce. |
| CBOs  | Project implementation support  | Participate in implementation of projects as appropriate.   |
| NYSDOH  | Project implementation support  | Provide metrics and benchmarks for DSRIP projects.  |
| Healthy Capital District Initiative (HCIDI)             | Project implementation support  | Provide support to the WCC and the CCAC as needed as well as provide guidance regarding the prevention agenda and the state   |





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| Key stakeholders                    | Role in relation to this organizational workstream | Key deliverables / responsibilities   |
|-------------------------------------|--|---|
|                                     |  | health improvement plan.  |
| Workforce Training Vendor           | Coordination and development of training programs  | Provide training and education to participating partners. Provide training for new hires, redeployed and other workers who need additional guidance and education on certain tasks related to DSRIP projects. |
| OASAS Office of Substance Abuse     | Project implementation support                     | Provide waivers for OASAS licensed facilities.  |
| Office of Mental Health (OMH)       | Project implementation support                     | Provide waivers for OMH licensed facilities.  |
| Alliance for Better Health Care PPS | Project Collaboration                              | Collaborate in the implementation of select projects accounting for the overlap in counties and network providers, including the prevention of redundancy and waste of resources.                             |
| Adirondack Health Institute PPS     | Project collaboration                              | Collaborate in the implementation of select projects accounting for the overlap in counties and network providers, including the prevention of redundancy and waste of resources.                             |
| MCO's and Payers                    | Financial sustainability and VBP                   | Collaborate in the development of contractual relationships to further transformation efforts towards VBP.  |
| HIXNY and SHIN-NY                   | Data exchange                                      | Develop connectivity and data exchange solutions across the provider network.   |



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**✓ IPQR Module 10.5 - IT Requirements**

**Instructions :**

Information technology will play a crucial role in the development of an effective, integrated performing provider system. It is likely that most projects will require some level of supporting IT infrastructure. Please describe the key elements of IT infrastructure development that will play a role in multiple projects.

Based on the availability of capital funding, AMCH PPS will develop an IT infrastructure that will be leveraged for the purposes of communication, data sharing and interoperability across all DSRIP projects. The AMCH PPS assessed the IT current state and identified a number of variations between providers in the network. The Technology and Data Management committee (TDMC) will develop an IT roadmap to achieve clinical data sharing and interoperability across the PPS network.

IT implementation objectives that effect multiple DSRIP projects include: achieving active participation and effective usage of the EHR system and patient registries for all providers in the system; meeting Meaningful Use and achieving 2014 Level three PCMH certification for all relevant providers; and connecting to HIXNY to access and share available clinical data across the PPS network. The AMCH PPS TDMC and CQA along with provider stakeholders will collaborate to ensure development of a sustainable, affordable and realistic plan for regional connectivity by building upon existing platforms and develop short term solutions that will evolve to long term sustainable technology interfaces.

The development of an IT infrastructure that allows for secure data sharing and interoperability is critical to the implementation of all DSRIP projects. The AMCH PPS will engage external and internal IT experts to mitigate the risk of shared PHI data.

**✓ IPQR Module 10.6 - Performance Monitoring**

**Instructions :**

Please explain how your DSRIP projects will fit into your development of a quality performance reporting system and culture.

AMCH PPS PMO is responsible for collecting and analyzing data and delivering the project's quarterly reports to the independent assessor and DOH, as well as communicating to the PPS board and the performing provider network performance outcomes, milestones and deliverables. AMCH PPS intends to utilize commercially available software to assist the PMO in creation of dashboards, milestone reporting, and preparation and submission of quarterly reports.



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#### ✅ IPQR Module 10.7 - Community Engagement

##### Instructions :

Please describe your PPS's planned approach for driving community involvement in the DSRIP projects, how you will contract with CBOs for these projects, how community engagement will contribute to the success of the projects, and any risks associated with this.

The Consumer and Community Affairs Committee (CCAC) is responsible for engaging key CBOs in strategic locations to encourage active consumer engagement and appropriate CBO participation in the DSRIP projects. The CCAC will develop a plan which will include a schedule of events to engage and stimulate consumer involvement in various population health activities. The CCAC will actively participate in local CORESTAT and other community revitalization efforts to communicate and coordinate ongoing outreach activities.

CBO's involved in DSRIP projects will enter into a contractual agreement with the PMO or other safety-net providers. Contracts for each CBO will vary by project and the amount of the awards will be performance based. Every CBO entering into a contract with the PMO will be required to meet all milestones and deliverables of the specific DSRIP project.

Community engagement is critical to the success of DSRIP for several reasons. First, allowing input from a diverse population will foster creative and innovative ideas, resulting in greater community buy-in. Second, community engagement enhances relationship building, which is an effective way to increase involvement among various stakeholders including Medicaid beneficiaries, community leaders and the uninsured. Third, CBOs are on the frontline of service delivery, know their communities and are trusted by consumers creating engagement opportunities that are important to DSRIP's success.

There are risks associated with the PPS's ability to maintain active community engagement. The success of the community engagement goals require voluntary participation of individuals and organizations. The disengagement of a CBO is a risk to the PPS's ability to maintain effective community integration. Many CBOs lack sophisticated infrastructure including IT capabilities, compliance, regulatory reporting, and financial management that pose a risk in terms of their abilities to effectively manage data, funds, and deliverables. Limitations based on the funding cap for non-safety net providers may limit engagement and interest opportunities for some CBOs. AMCH PPS will mitigate these risks through effective communication, community engagement, transparent decision making, technical assistance and support including financial management and data reporting.

#### IPQR Module 10.8 - IA Monitoring

##### Instructions :



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**Section 11 – Workforce**

**IPQR Module 11.1 - Workforce Strategy Spending (Baseline)**

**Instructions :**

Please include details on expected workforce spending on a semi-annual basis. Funds may be shifted from one funding type category to another within the workforce strategy spending table, as long as the PPS adheres to their overall spend commitments. However, the PPS may apply a 25% discount factor to the DY1 Workforce Strategy Spend target. If the PPS applies this discount in DY1, the PPS will be expected to reallocate those funds appropriately in DY2-4 to fully meet their DY1-4 total commitment.

| Funding Type              | Year/Quarter   |                   |                   |                   |                   |                   |                   |                   |                   |                   | Total Spending(\$)  |
|---------------------------|----------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|---------------------|
|                           | DY1(Q1/Q2)(\$) | DY1(Q3/Q4)(\$)    | DY2(Q1/Q2)(\$)    | DY2(Q3/Q4)(\$)    | DY3(Q1/Q2)(\$)    | DY3(Q3/Q4)(\$)    | DY4(Q1/Q2)(\$)    | DY4(Q3/Q4)(\$)    | DY5(Q1/Q2)(\$)    | DY5(Q3/Q4)(\$)    |                     |
| Retraining                | 0.00           | 613,996.00        | 454,111.00        | 454,111.00        | 454,111.00        | 454,111.00        | 415,475.00        | 415,475.00        | 246,373.00        | 246,373.00        | 3,754,136.00        |
| Redeployment              | 0.00           | 78,793.00         | 37,884.00         | 37,884.00         | 37,884.00         | 37,884.00         | 28,225.00         | 28,225.00         | 23,772.00         | 23,772.00         | 334,323.00          |
| New Hires                 | 0.00           | 59,475.00         | 28,225.00         | 28,225.00         | 28,225.00         | 28,225.00         | 28,225.00         | 28,225.00         | 14,112.00         | 14,112.00         | 257,049.00          |
| Other                     | 0.00           | 126,750.00        | 126,750.00        | 126,750.00        | 126,750.00        | 126,750.00        | 126,750.00        | 126,750.00        | 62,875.00         | 62,875.00         | 1,013,000.00        |
| <b>Total Expenditures</b> | <b>0.00</b>    | <b>879,014.00</b> | <b>646,970.00</b> | <b>646,970.00</b> | <b>646,970.00</b> | <b>646,970.00</b> | <b>598,675.00</b> | <b>598,675.00</b> | <b>347,132.00</b> | <b>347,132.00</b> | <b>5,358,508.00</b> |

**Current File Uploads**

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**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status   | IA Formal Comments |
|-----------------|--------------------|
| Pass & Complete |                    |



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**✔ IPQR Module 11.2 - Prescribed Milestones**

**Instructions :**

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Please note some milestones include minimum expected completion dates.

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Milestone #1</b><br>Define target workforce state (in line with DSRIP program's goals).  | Completed | Finalized PPS target workforce state, signed off by PPS workforce governance body.   | 07/01/2015          | 06/30/2016        | 07/01/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | NO |
| <b>Task</b><br>1. Establish a permanent Workforce Coordinating Council (WCC) as defined in AMCH's Project Advisory Committee (PAC) operating guidelines and principles. This council will include representation from labor, management, workers, training vendors, and other key stakeholders. | Completed | 1. Establish a permanent Workforce Coordinating Council (WCC) as defined in AMCH's Project Advisory Committee (PAC) operating guidelines and principles. This council will include representation from labor, management, workers, training vendors, and other key stakeholders. | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>2. Identify workforce needs associated with each approved project and in consultation with key stakeholders in the PAC. This will be done via a survey instrument or other means to document staff training and development, redeployment, retention, and recruitment needs.     | Completed | 2. Identify workforce needs associated with each approved project and in consultation with key stakeholders in the PAC. This will be done via a survey instrument or other means to document staff training and development, redeployment, retention, and recruitment needs.     | 07/01/2015          | 12/31/2015        | 07/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |    |
| <b>Task</b><br>3. WCC will define job role classifications and group titles across provider types to assess need, prioritize roles, skills and licensure requirements to assist with retraining and redeployment.   | Completed | 3. WCC will define job role classifications and group titles across provider types to assess need, prioritize roles, skills and licensure requirements to assist with retraining and redeployment.   | 07/01/2015          | 09/30/2015        | 07/01/2015 | 09/30/2015 | 09/30/2015       | DY1 Q2                           |    |
| <b>Task</b><br>4. Perform a future state staffing analysis at the project level to assess whether more, less, or different resources are required for project implementation and incorporate into the workforce roadmap.  | Completed | 4. Perform a future state staffing analysis at the project level to assess whether more, less, or different resources are required for project implementation and incorporate into the workforce roadmap.  | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |



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| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| <b>Task</b><br>5. Using the results from previous steps, the WCC will work with individual providers and our workforce development vendor to assess future state staffing needs by site and incorporate them into the workforce roadmap.  | Completed | 5. Using the results from previous steps, the WCC will work with individual providers and our workforce development vendor to assess future state staffing needs by site and incorporate them into the workforce roadmap.  | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Task</b><br>6. WCC will define target workforce state (in line with DSRIP program's goals) and present to the PAC Executive Committee for adoption.  | Completed | 6. WCC will define target workforce state (in line with DSRIP program's goals) and present to the PAC Executive Committee for adoption.  | 02/15/2016          | 06/30/2016        | 02/15/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <b>Milestone #2</b><br>Create a workforce transition roadmap for achieving defined target workforce state.  | Completed | Completed workforce transition roadmap, signed off by PPS workforce governance body.   | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           | NO |
| <b>Task</b><br>1. The WCC, in collaboration with the training vendor, will analyze the gap analysis, workforce survey, CNA, and other resources to determine the workforce gaps for each project. The WCC will develop project specific timelines for the retraining, recruitment, and redeployment of the workforce. | Completed | 1. The WCC, in collaboration with the training vendor, will analyze the gap analysis, workforce survey, CNA, and other resources to determine the workforce gaps for each project. The WCC will develop project specific timelines for the retraining, recruitment, and redeployment of the workforce. | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>2. The WCC, in collaboration with the training vendor, will develop strategies to alleviate the PPS workforce gaps. These strategies will be outlined in the workforce transition roadmap.   | Completed | 2. The WCC, in collaboration with the training vendor, will develop strategies to alleviate the PPS workforce gaps. These strategies will be outlined in the workforce transition roadmap.   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>3. The WCC will present the finalized roadmap to the PAC Executive Committee for review and approval by the end of DY1Q4.  | Completed | 3. The WCC will present the finalized roadmap to the PAC Executive Committee for review and approval by the end of DY1Q4.  | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>4. Based on feedback from the PAC Executive Committee, the WCC will modify the roadmap where appropriate.  | On Hold   | 4. Based on feedback from the PAC Executive Committee, the WCC will modify the roadmap where appropriate.  | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |    |
| <b>Task</b><br>5. The WCC, in collaboration with the training vendor, will continually review the workforce roadmap and assess the ongoing recruitment, retraining, redeployment needs of the PPS. The WCC will make modifications to the roadmap where   | Completed | 5. The WCC, in collaboration with the training vendor, will continually review the workforce roadmap and assess the ongoing recruitment, retraining, redeployment needs of the PPS. The WCC will make modifications to the roadmap where   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV  |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|-----|
| retraining, redeployment needs of the PPS. The WCC will make modifications to the roadmap where necessary.   |           | necessary.  |                     |                   |            |            |                  |                                  |     |
| <b>Task</b><br>6. The WCC will update the PAC Executive annually on the progress made toward achieving the workforce target state and address any modifications that have been made to the original roadmap.   | Completed | 6. The WCC will update the PAC Executive annually on the progress made toward achieving the workforce target state and address any modifications that have been made to the original roadmap.   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Milestone #3</b><br>Perform detailed gap analysis between current state assessment of workforce and projected future state.   | Completed | Current state assessment report & gap analysis, signed off by PPS workforce governance body.  | 07/01/2015          | 09/30/2016        | 07/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           | NO  |
| <b>Task</b><br>1. Based on workforce needs, conduct a capacity and workforce shortage assessment to direct the roadmap towards highest areas of need.  | Completed | 1. Based on workforce needs, conduct a capacity and workforce shortage assessment to direct the roadmap towards highest areas of need.  | 07/01/2015          | 09/30/2016        | 07/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>2. Expanding on the work product of the previous milestone the WCC will create a detailed process for monitoring gaps identified in the workforce.  | Completed | 2. Expanding on the work product of the previous milestone the WCC will create a detailed process for monitoring gaps identified in the workforce.  | 07/01/2015          | 09/30/2016        | 07/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>3. WCC will conduct Current State Assessment and Gap analysis that evaluates changes in the workforce including roles, skills, and licensure requirements as well as opportunities for new hires, redeployment, or retraining of existing staff.  | Completed | 3. WCC will conduct Current State Assessment and Gap analysis that evaluates changes in the workforce including roles, skills, and licensure requirements as well as opportunities for new hires, redeployment, or retraining of existing staff.  | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |     |
| <b>Task</b><br>4. Based on the results of the gap analysis the WCC, in collaboration with the finance committee, PAC Executive Committee and our workforce vendor, will review and refine the workforce strategy budget to ensure that sufficient funds are available for training and development of the workforce. | On Hold   | 4. Based on the results of the gap analysis the WCC, in collaboration with the finance committee, PAC Executive Committee and our workforce vendor, will review and refine the workforce strategy budget to ensure that sufficient funds are available for training and development of the workforce. | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |     |
| <b>Milestone #4</b><br>Produce a compensation and benefit analysis,  | Completed | Compensation and benefit analysis report, signed off by PPS workforce governance body.  | 09/30/2015          | 06/30/2016        | 09/30/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           | YES |



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name   | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements.  |           |   |                     |                   |            |            |                  |                                  |    |
| <p><b>Task</b><br/>1. Consistent with all labor laws, regulations, and Federal Trade Commission standards, the WCC in collaboration with our workforce vendor and other regional PPSs, will contract a third party to conduct an extensive review or will utilize information provided by a state-wide vendor (distribute surveys, collect information, and conduct follow-ups) of compensation for all levels of the workforce from community health workers through MD Psychiatrists.</p> <p>Note: The WCC will receive aggregate workforce data and analysis from the workforce vendor, but not provider specific salary or benefit information.</p> | Completed | <p>1. Consistent with all labor laws, regulations, and Federal Trade Commission standards, the WCC in collaboration with our workforce vendor and other regional PPSs, will contract a third party to conduct an extensive review or will utilize information provided by a state-wide vendor (distribute surveys, collect information, and conduct follow-ups) of compensation for all levels of the workforce from community health workers through MD Psychiatrists.</p> <p>Note: The WCC will receive aggregate workforce data and analysis from the workforce vendor, but not provider specific salary or benefit information.</p> | 09/30/2015          | 06/30/2016        | 09/30/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <p><b>Task</b><br/>2. Once the aggregate data is received, the WCC will analyze the aggregate data by position, project, and employment status to determine workforce impact.</p>   | Completed | 2. Once the aggregate data is received, the WCC will analyze the aggregate data by position, project, and employment status to determine workforce impact.  | 09/30/2015          | 06/30/2016        | 09/30/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <p><b>Task</b><br/>3. The WCC will collaborate with the training vendor to develop retraining and re-deployment strategies to ensure appropriate placement for retrained and reassigned workers.</p>  | Completed | 3. The WCC will collaborate with the training vendor to develop retraining and re-deployment strategies to ensure appropriate placement for retrained and reassigned workers.   | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <p><b>Task</b><br/>4. The WCC will present the summary aggregate compensation and benefits analysis report to the PAC Executive Committee for review and approval.</p>  | Completed | 4. The WCC will present the summary aggregate compensation and benefits analysis report to the PAC Executive Committee for review and approval.   | 09/30/2015          | 06/30/2016        | 09/30/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |
| <p><b>Task</b><br/>5. The WCC will develop a process, which will be approved by the PAC Executive Committee, to</p>   | Completed | 5. The WCC will develop a process, which will be approved by the PAC Executive Committee, to identify, track, and report quarterly all staff that are either partially or fully redeployed  | 09/30/2015          | 06/30/2016        | 09/30/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |    |





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**Albany Medical Center Hospital (PPS ID:1)**

| Milestone/Task Name   | Status    | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|---|-----------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| identify, track, and report quarterly all staff that are either partially or fully redeployed within participating provider organizations.  |           | within participating provider organizations.   |                     |                   |            |            |                  |                                  |    |
| <b>Milestone #5</b><br>Develop training strategy.   | Completed | Finalized training strategy, signed off by PPS workforce governance body.  | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           | NO |
| <b>Task</b><br>1. The WCC will conduct an assessment of the PPSs existing workforce training programs via survey. This survey will be disseminated to all of AMCH PPS partners for completion.  | Completed | 1. The WCC will conduct an assessment of the PPSs existing workforce training programs via survey. This survey will be disseminated to all of AMCH PPS partners for completion.  | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>2. The WCC in collaboration with the training vendor, will assess the workforce survey to identify any training gaps within the PPS.   | Completed | 2. The WCC in collaboration with the training vendor, will assess the workforce survey to identify any training gaps within the PPS.   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>3. The WCC, in collaboration with the training vendor and physician champions identified through the CQAC, will determine the areas of training to be further developed, as well as new training programs to be created. | Completed | 3. The WCC, in collaboration with the training vendor and physician champions identified through the CQAC, will determine the areas of training to be further developed, as well as new training programs to be created. | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>4. The WCC will create a training plan that outlines strategies needed to improve existing training programs, as well as the new training programs that will be available throughout the PPS.                            | Completed | 4. The WCC will create a training plan that outlines strategies needed to improve existing training programs, as well as the new training programs that will be available throughout the PPS.                            | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>5. The WCC will work with the Cultural Competency and Health Literacy Committee to ensure that training programs are culturally and linguistically appropriate.  | Completed | 5. The WCC will work with the Cultural Competency and Health Literacy Committee to ensure that training programs are culturally and linguistically appropriate.  | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>6. The WCC will work with the CQAC to identify training needs resulting from integration of clinical services, especially primary and behavioral health and patient centered care.                                       | Completed | 6. The WCC will work with the CQAC to identify training needs resulting from integration of clinical services, especially primary and behavioral health and patient centered care.                                       | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |
| <b>Task</b><br>7. The WCC will distribute the overall training  | Completed | 7. The WCC will distribute the overall training plan to the PAC Executive Committee for review and approval.   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |



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| Milestone/Task Name  | Status    | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter | AV |
|--|-----------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|----|
| plan to the PAC Executive Committee for review and approval.   |           |   |                     |                   |            |            |                  |                                  |    |
| <b>Task</b><br>8. The WCC, in collaboration with the workforce training vendor and participating provider reporting requirements, will track the online training programs to ensure participating providers are utilizing workforce training programs. | On Hold   | 8. The WCC, in collaboration with the workforce training vendor and participating provider reporting requirements, will track the online training programs to ensure participating providers are utilizing workforce training programs. | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |    |
| <b>Task</b><br>9. The WCC will develop a process for evaluating training outcomes and the effectiveness of all DSRIP training programs and will continually assess each program's effectiveness on a quarterly basis.                                  | Completed | 9. The WCC will develop a process for evaluating training outcomes and the effectiveness of all DSRIP training programs and will continually assess each program's effectiveness on a quarterly basis.                                  | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |    |

**IA Instructions / Quarterly Update**

| Milestone Name | IA Instructions | Quarterly Update Description |
|----------------|-----------------|------------------------------|
|----------------|-----------------|------------------------------|

No Records Found

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type | File Name  | Description                                  | Upload Date         |
|---|---------|-----------|--|--|---------------------|
| Define target workforce state (in line with DSRIP program's goals).                 | mcintyc | Templates | 1_DY2Q4_WF_MDL112_PRES1_TEMPL_Meeting_Schedule_Template-Workforce_-_DY2Q4_11300.xlsx     | Meeting Schedule Template- Workforce - DY2Q4 | 04/21/2017 02:03 PM |
| Create a workforce transition roadmap for achieving defined target workforce state. | mcintyc | Templates | 1_DY2Q4_WF_MDL112_PRES2_TEMPL_Meeting_Schedule_Template-Workforce_-_DY2Q4_(2)_11302.xlsx | Meeting Schedule Template- Workforce - DY2Q4 | 04/21/2017 02:04 PM |
| Develop training strategy.  | mcintyc | Templates | 1_DY2Q4_WF_MDL112_PRES5_TEMPL_Training_Schedule_Template-Workforce-_DY2Q4_11303.xlsx     | Training Schedule Template- Workforce- DY2Q4 | 04/21/2017 02:05 PM |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Define target workforce state (in line with DSRIP program's goals).   |                |
| Create a workforce transition roadmap for achieving defined target workforce state.   |                |
| Perform detailed gap analysis between current state assessment of workforce and projected future state.   |                |
| 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. |                |
| Develop training strategy.  |                |

**Milestone Review Status**

| Milestone #         | Review Status   | IA Formal Comments |
|---------------------|-----------------|--------------------|
| <b>Milestone #1</b> | Pass & Complete |                    |
| <b>Milestone #2</b> | Pass & Complete |                    |
| <b>Milestone #3</b> | Pass & Complete |                    |
| <b>Milestone #4</b> | Pass & Complete |                    |
| <b>Milestone #5</b> | Pass & Complete |                    |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 11.3 - PPS Defined Milestones**

**Instructions :**

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

| Milestone/Task Name | Status | Description | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
|---------------------|--------|-------------|---------------------|-------------------|------------|----------|------------------|----------------------------------|

No Records Found

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name | Narrative Text |
|----------------|----------------|
|----------------|----------------|

No Records Found



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 11.4 - Major Risks to Implementation & Risk Mitigation Strategies

##### Instructions :

Please describe the key challenges and risks that you foresee in achieving the milestones set out above, including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

Below is a list of recognized risks and approaches the PPS will undertake to mitigate those risks:

- Shortages in the workforce:
  - o We anticipate that there will be identified shortages of specific types of workers, especially as we undertake to introduce a new type of healthcare worker into the workforce. We hope to be able to mitigate this by training workers in this field prior to the planned deployment into the field. By accelerating the training of new categories of workers we hope to reduce the risk of having open jobs with a lack of qualified candidates.
- Shifting needs of the workforce:
  - o The needs of the workforce cannot be fully understood prior to project implementation. The PPS will undertake training and educational strategies in collaboration with our contracted workforce development vendor to prepare existing workers for the new opportunities that will be created by the DSRIP program.
- Lack of defined roles for new categories of workers:
  - o We will work with our workforce vendor to clearly define the roles of the new categories of workers and to develop appropriate training curriculum for these positions.
- Disparate training expectations of various performing provider organizations with conflicting Human Resources policies:
  - o While the PPS will not establish Human Resources policies for participating organizations, funded providers will have a contractual obligation requiring staff participation in training activities. We will work with unionized employees to enlist union support of training strategies.

#### ✅ IPQR Module 11.5 - Major Dependencies on Organizational Workstreams

##### Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The workforce work stream is dependent upon the following other work streams: Governance, Finance, Information Technology, Practitioner Engagement, Clinical Integration, and Cultural Competency and Health Literacy. Recognizing the dependence of all healthcare providers on their most important resource - their staff - everything we propose to do in DSRIP is dependent upon having a motivated, trained, and highly qualified staff engaged in the process. Dependence on Governance is related to decision making approvals for the actions and deliverables of the WCC. Finance impacts the WCC and the workforce work stream both in terms of budget support for deliverables and potential incentives to providers for training accomplishments. Workforce is dependent on Information Technology to provide online training, to conduct electronic assessments, and to collect and report data. Workforce is dependent upon practitioner engagement, clinical integration and cultural competency and health literacy for buy in and a commitment to address staff training needs.



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Delivery System Reform Incentive Payment Project**

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**Albany Medical Center Hospital (PPS ID:1)**

**✓ IPQR Module 11.6 - Roles and Responsibilities**

**Instructions :**

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

| <b>Role</b>           | <b>Name of person / organization (if known at this stage)</b>            | <b>Key deliverables / responsibilities</b>   |
|-----------------------|--|--|
| PMO Workforce Contact | John DelGrosso, Project Manager; Simone Brooks, Project Manager          | Liaison between WCC and Workforce Training Vendor. Assist the WCC with the implementation of the workforce strategy deliverables and milestones.                                     |
| WCC Chairperson       | Kelly Sweeney  | Facilitate workforce meetings, assist with milestones and deliverables, and present recommendations to the PAC Executive Committee for review and approval.                          |
| Workforce Vendor(s)   | HealthStream, Iroquois Healthcare Association, BDO Consulting, Accenture | Assist the WCC with the training, recruitment, and redeployment of the PPS workforce. Will assist with the current and future workforce state analysis, as well as the gap analysis. |
| WCC Member            | Albany Medical Center  | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | Columbia Memorial Hospital   | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | Saratoga Hospital  | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | 1199SEIU   | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | Center for Disability Services   | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | AHEC   | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | HCDI   | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | Greene County Public Health  | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |
| WCC Member            | Columbia County DOH  | Attend monthly WCC meetings and work towards accomplishing the workforce strategy milestones and deliverables.   |



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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 11.7 - Key Stakeholders**

**Instructions :**

Please identify the key stakeholders involved in your workforce transformation plans, both within and outside the PPS.

| <b>Key stakeholders</b>                    | <b>Role in relation to this organizational workstream</b> | <b>Key deliverables / responsibilities</b>   |
|--|---|--|
| <b>Internal Stakeholders</b>               |   |  |
| Albany Medical Center Hospital             | Largest workforce employer in the PPS                     | Actively participate in assessment, training, coordination and staffing issues         |
| PPS Participating Providers                | Workforce representation across the PPS                   | Actively participate in assessment, training, coordination and staffing issues         |
| Albany Medical Center Faculty Practice     | Largest Provider workforce in the PPS                     | Actively participate in assessment, training, coordination and staffing issues         |
| <b>External Stakeholders</b>               |   |  |
| Labor Unions                               | Provide needed input and guidance                         | Assistance as needed to ensure PPS includes appropriate levels of input from workforce |
| Unrepresented workers                      | Provide needed input and guidance                         | Assistance as needed to ensure PPS includes appropriate levels of input from workforce |
| Healthy Capital District Initiative (HCDI) | Coordinate training needs with PHIP and SHIP              | Coordinated Curriculum and training schedule   |
| Workforce training Vendor                  | Coordinating development of training plan                 | Provision of training including evaluation of outcomes                                 |
| Regional PPSs                              | Collaboration on workforce opportunities                  | Ongoing assistance in coordination of workforce initiatives                            |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

#### ✅ IPQR Module 11.8 - IT Expectations

##### Instructions :

Please describe how the development of shared IT infrastructure across the PPS will support your plans for workforce transformation.

Alignment between workforce and IT is critical to DSRIP success. Once our training strategy and plan are implemented, we will rely on IT platforms to track training progress (e.g. tracking completed training, when and what was trained and certifications achieved, etc.). This will require a Cross PPS reporting system to facilitate data collection and analysis. The AMCH PPS will execute the workforce transition roadmap by relying on IT capabilities to track staff movement and changes across the PPS (e.g. redeployed staff, net new hires). We will need a central IT system that is both capable of tracking workforce changes and gathering data and information related to these changes in a seamless and timely fashion. This system will also be necessary to report on measures for required quarterly progress reports. Finally, as we undertake this large-scale workforce transformation, a central IT system will enable the AMCH PPS to track open positions and staffing needs across the PPS by creating a jobs database that will allow workers the ability to see employment availability and opportunity across the member organizations.

#### ✅ IPQR Module 11.9 - Progress Reporting

##### Instructions :

Please describe how you will measure the success of this organizational workstream.

Based on our approved training strategy, AMCH's PPS will collect data electronically from all participating providers on a quarterly basis in regards to the training provided, new hires, staff redeployment, and reassignment as well as un-met needs. AMCH will utilize project management software for this purpose. Training accomplishments including pre and post test training evaluations will be captured either from SAKAI (AMCH's online training portal) or our workforce training vendor. Additional documentation of adopted workforce strategies and operations will be provided from meeting minutes and other sources that demonstrate the PAC Executive Committee review and approval process. Success of the organizational work stream will be measured by the total number of workers that receive training or re-training. Additionally we will monitor employment levels and net-new workers added to the workforce. Specific gaps that are identified in the project plan will be monitored and success will be based on the progress in closing those gaps.





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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 11.10 - Staff Impact**

**Instructions :**

Please upload the Workforce Staffing Impact (Projections) and the Workforce Staffing Impact (Actuals) tables provided for quarterly reporting.

**Current File Uploads**

| User ID | File Type | File Name   | File Description  | Upload Date         |
|---------|-----------|---|---|---------------------|
| mcintyc | Templates | 1_DY2Q4_WF_MDL1110_TEMPL_BHNNY_Workforce_Staffing_Impact_(Actuals)_DY1_11602.xlsx           | BHNNY Workforce Staffing Impact (Actuals)_DY1           | 04/24/2017 11:36 AM |
| mcintyc | Templates | 1_DY2Q4_WF_MDL1110_TEMPL_BHNNY_Workforce_Staffing_Impact_(Actuals)_(Oct16-Mar17)_11599.xlsx | BHNNY Workforce Staffing Impact (Actuals)_(Oct16-Mar17) | 04/24/2017 11:35 AM |

**Narrative Text :**

The PMO collected staffing impact data from the organizational partners to report staffing changes throughout BHNNY during DY1 and DY2Q4, with submissions due to the PMO by April 10, 2017. The data uses April 1, 2015 – March 31, 2017 (DY1) and DY2Q2) as the reporting period per guidance from the Independent Assessor. In March 2017, the PMO delivered a webinar to the partners to train on properly reporting the data using the DOH-provided template.

The self-reported facility types were used to identify the organizations. However, in cases that the organization selected 'Other,' the facility type most closely related as compared to similar organizations was selected. Likewise, the organizations identified their staff using the 65 DSRIP job titles recognized by the State that most closely fit into the definitions provided by DOH.

The group of retrained employees reported includes employees who remain in their current position and have received skill development training to support DSRIP. The PPS felt it was important to understand the impact of skill development training and additional effort devoted to DSRIP activities by all impacted staff, not just those redeployed from their current position. This entire group is reported as full placement. As per DOH guidance, redeployment takes precedence over retraining for staff that was both redeployed and retrained.

Redeployed staff reported under the full placement includes both full and enhanced placement, PPS employees that moved into a role at least 95% of their original salary as per the state-provided placement definitions. New hires reported under partial placement are PPS employees that the partners reported as less than full-time staff, otherwise they are reported as full placement.

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

**✔ IPQR Module 11.11 - Workforce Strategy Spending (Quarterly):**

**Instructions :**

Please include details on workforce spending for DY2. The workforce spending actuals should reflect only what was spent during the relevant quarters and is not cumulative across semi-annual periods. The PPS can shift funding across categories; e.g., from Retraining to New Hires. Please note that the "Cumulative Percent of Commitments Expended through Current DSRIP Year (DY2)" section is calculated based on the total yearly commitments.

| Benchmarks   |              |
|--|--------------|
| Year   | Amount(\$)   |
| Total Cumulative Spending Commitment through Current DSRIP Year(DY2) | 2,172,954.00 |

| Funding Type              | Workforce Spending Actuals |                   | Cumulative Spending to Date (DY1-DY5)(\$) | Cumulative Percent of Commitments Expended through Current DSRIP Year (DY2) |
|---------------------------|----------------------------|-------------------|---|---|
|                           | DY2(Q1/Q2)(\$)             | DY2(Q3/Q4)(\$)    |   |   |
| Retraining                | 51,526.48                  | 446,505.36        | 508,281.84                                | 33.39%  |
| Redeployment              | 0.00                       | 143,287.68        | 143,287.68                                | 92.71%  |
| New Hires                 | 0.00                       | 80,698.93         | 96,849.41                                 | 83.54%  |
| Other                     | 459,016.92                 | 43,673.65         | 1,028,815.57                              | 270.56%   |
| <b>Total Expenditures</b> | <b>510,543.40</b>          | <b>714,165.62</b> | <b>1,777,234.50</b>                       | <b>81.79%</b>   |

**Current File Uploads**

| User ID | File Type | File Name | File Description | Upload Date |
|---------|-----------|-----------|------------------|-------------|
|---------|-----------|-----------|------------------|-------------|

No Records Found

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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**IPQR Module 11.12 - IA Monitoring:**

**Instructions :**



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**Project 2.a.i – Create Integrated Delivery Systems that are focused on Evidence-Based Medicine / Population Health Management**

**✓ IPQR Module 2.a.i.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

The primary risk for clinical integration will be lack of participation from practitioners and leaders of healthcare organizations. Based on the CNA, care is neither integrated nor coordinated among the PPS service area. The absence of EHR Connectivity results in patients with co-morbidities who see several providers who may not routinely coordinate care with one another. Data sharing age restrictions will be a challenge for organizations serving pediatrics. P4P and VBP have not yet had a significant impact on the region, with less than 10% of the current payer contracts requiring risk sharing arrangements. Further challenges include: ineffective patient engagement/behavioral modification, the need for additional payer guidance, non-reimbursable costs of some services, costs of implementation, lack of data from private payers, OPWDD regulatory restrictions, lack of managed care services for the developmentally disabled, and the current shortage of BH providers. Integration of care delivery will require the differences in licensure, billing and compliance issues between article 28 & 31 providers to be minimized. Gaps in infrastructure/technology that prevent communication and care plan development between organizations will be a risk; only 40% of our partners are connected to HIXNY and only 1 in 5 participating PCP practices are NCQA PCMH Level 3 certified. The sheer volume of need for individuals, the workforce licensure, skill-set and the siloed nature of many CBOs will be a challenge to overcome. To mitigate these risks, we will:

- Facilitate ongoing collaboration between the TDMC, CQAC and provider stakeholders to ensure development of a sustainable, affordable and realistic plans for regional connectivity by building upon existing platforms to develop short-term solutions that will evolve to long-term sustainable technology interfaces.
- Provide seamless care for patients by increasing healthcare capacity through partnerships across all provider types, new access points and redeploying existing resources and workforce.
- Employ tele-health options and other emerging technologies to increase access in identified HPSAs.
- Assess VBP readiness of our partners to establish baseline data and ensure partners are prepared to align provider compensation to patient outcomes. AMCH PPS will incorporate risk based arrangements in contracts across the PPS to incentivize providers.
- Assist partners in developing population health strategies through the use of data analytics and risk stratification.
- Utilize current/future partners that have experience to develop risk based arrangements & population health management including care management and coordination.
- Draw on expertise of HH partners to help support integration strategies.
- Conduct monthly meetings with MCOs to discuss utilization issues, performance and payment reform.
- Engage patients through CBOs, peers, health workers, etc. to become partners and modify behavior to improve access and quality of care.
- Assess the PCP partners' readiness to certify as a level 3 PCMH through a team of experts who will coach, support and incentivize the PCPs through the process of obtaining this recognition.
- DSRIP training/education team will provide resources and materials to organizations that will improve understanding, collaboration, IDS and patient engagement. Materials will be developed as needed for patient compliance and distributed after review and approval by the CCHLC. Our workforce training vendor will provide training/resources for the current workforce to ensure there is a level of comfort with any additional



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responsibilities.

- Develop, implement, and monitor clinical care guidelines to improve and standardize clinical integration across the network.
- Drive clinical integration through the alignment of incentives for participating providers.



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**✅ IPQR Module 2.a.i.2 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>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. | DY2 Q2              | Project         | N/A           | Completed | 09/15/2015          | 09/30/2016        | 09/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS includes continuum of providers in IDS, including medical, behavioral health, post-acute, long-term care, and community-based providers.  |                     | Project         |               | Completed | 09/15/2015          | 12/31/2015        | 09/15/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:1. AMCH PMO will analyze the services offered within the PPS provider network to identify medical, behavioral health, post acute, long term care, community based, health home providers and health homes with whom the PPS can collaborate with to ensure a full continuum of care.   |                     | Project         |               | Completed | 10/12/2015          | 12/31/2015        | 10/12/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO will engage participating providers by conducting regional stakeholder meetings, as needed, to encourage provider buy-in and collaboration for IDS implementation. In addition, the AMCH PMO will seek additional service providers, as needed, to address gaps identified from the analysis conducted in the previous step.         |                     | Project         |               | Completed | 10/26/2015          | 12/31/2015        | 10/26/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. AMCH PMO will meet with participating partners, including health homes, to establish clear expectations regarding: performance indicators, utilization, quality metrics and payment reform, methodologies to incentivize behavior, implementation plan milestones, and allocation/sharing of existing resources within the PPS.               |                     | Project         |               | Completed | 02/16/2016          | 06/30/2016        | 02/16/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:4. AMCH PMO will meet with payers and social service agencies, as necessary, and enter into working relationships  |                     | Project         |               | Completed | 02/01/2016          | 06/30/2016        | 02/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| and/or consulting arrangements to further IDS implementation.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. AMCH PMO will develop and disseminate participation agreements with the provider network to define the rules, regulations, and responsibilities of all parties. Once completed, these agreements will form the basis of participation for the duration of the DSRIP program. |                     | Project         |               | Completed | 09/15/2015          | 09/30/2016        | 09/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. Signed participation agreements will be completed by September 2016.   |                     | Project         |               | Completed | 09/15/2015          | 09/30/2016        | 09/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #2</b><br>Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.   | DY2 Q2              | Project         | N/A           | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS produces a list of participating HHs and ACOs.   |                     | Project         |               | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Participating HHs and ACOs demonstrate real service integration which incorporates a population management strategy towards evolving into an IDS.  |                     | Project         |               | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Regularly scheduled formal meetings are held to develop collaborative care practices and integrated service delivery.  |                     | Project         |               | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO will create a list of participating health home providers in the PPS network.   |                     | Project         |               | Completed | 09/07/2015          | 12/21/2015        | 09/07/2015 | 12/21/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:1. AMCH PMO will survey participating providers and HHs/ACOs to obtain current IT networking capabilities.  |                     | Project         |               | Completed | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. AMCH PMO will identify and assess current capabilities of partnering HHs and utilize baseline information to analyze gaps and identify opportunities for improvement/evolution of HH to IDS.   |                     | Project         |               | Completed | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:3. Based on the IT roadmap, AMCH PMO will incorporate a strategy to integrate health home management systems into the population health management system of the IDS.   |                     | Project         |               | Completed | 10/19/2015          | 06/30/2016        | 10/19/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M3:1. AMCH PMO will routinely hold engagement meetings with payers, participating providers, social service agencies,  |                     | Project         |               | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |





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| <b>Project Requirements<br/>(Milestone/Task Name)</b>  | <b>Prescribed<br/>Due Date</b> | <b>Reporting<br/>Level</b> | <b>Provider Type</b> | <b>Status</b> | <b>Original<br/>Start Date</b> | <b>Original<br/>End Date</b> | <b>Start Date</b> | <b>End Date</b> | <b>Quarter<br/>End Date</b> | <b>DSRIP<br/>Reporting Year<br/>and Quarter</b> |
|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| community based organizations, and others to develop collaborative care practices during the transformation process.   |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Milestone #3</b><br>Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.   | DY2 Q2                         | Project                    | N/A                  | Completed     | 06/01/2015                     | 09/30/2016                   | 06/01/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>Clinically Interoperable System is in place for all participating providers.  |                                | Project                    |                      | Completed     | 06/01/2015                     | 09/30/2016                   | 06/01/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>PPS has protocols in place for care coordination and has identified process flow changes required to successfully implement IDS.  |                                | Project                    |                      | Completed     | 06/01/2015                     | 09/30/2016                   | 06/01/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>PPS has process for tracking care outside of hospitals to ensure that all critical follow-up services and appointment reminders are followed.   |                                | Project                    |                      | Completed     | 06/01/2015                     | 09/30/2016                   | 06/01/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>PPS trains staff on IDS protocols and processes.  |                                | Project                    |                      | Completed     | 06/01/2015                     | 09/30/2016                   | 06/01/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee. |                                | Project                    |                      | Completed     | 10/05/2015                     | 11/30/2015                   | 10/05/2015        | 11/30/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.   |                                | Project                    |                      | Completed     | 10/05/2015                     | 11/30/2015                   | 10/05/2015        | 11/30/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:3. Work with participating providers, not currently using EHRs, to incentivize EHR adoption for patient care management.   |                                | Project                    |                      | Completed     | 07/01/2016                     | 09/30/2016                   | 07/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.   |                                | Project                    |                      | Completed     | 10/01/2015                     | 12/31/2015                   | 10/01/2015        | 12/31/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:5. Utilizing the IT-TOM pilot experience, design the PPS-wide  |                                | Project                    |                      | Completed     | 06/01/2015                     | 03/31/2016                   | 06/01/2015        | 03/31/2016      | 03/31/2016                  | DY1 Q4  |



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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| future state connectivity model.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.  |                     | Project         |               | Completed | 02/12/2016          | 09/30/2016        | 02/12/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.  |                     | Project         |               | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. AMCH PMO will identify the current state of care coordination, services and workflow. AMCH PMO will create the future state of what collaboration linkages need to be created to ensure successful implementation over the DSRIP five year program.                                    |                     | Project         |               | Completed | 10/05/2015          | 06/30/2016        | 10/05/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:2. AMCH PMO will complete a gap-analysis utilizing the current state assessment and defined future state and, working in collaboration with partners, develop an action plan for the implementation of the IDS model.   |                     | Project         |               | Completed | 10/05/2015          | 06/30/2016        | 10/05/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:3. AMCH PMO will implement the approved action plan utilizing the PDSA approach.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:4. AMCH PMO will monitor ongoing performance, analyze clinical and operational outcomes and identify timelines/practice sites for spread of successful tests of change.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:5. AMCH PMO, in collaboration with the CQAC, will conduct a thorough review of existing care management and coordination protocols to select nationally recognized best practices to meet various project requirements and milestones required for transformation and patient engagement. |                     | Project         |               | Completed | 10/05/2015          | 06/30/2016        | 10/05/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:6. AMCH PMO, in collaboration with the TDMC, will build upon existing platforms and develop short-term solutions for integration including protocols in place for care coordination and processes for tracking care outside of hospitals to ensure care follow up.                        |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b>   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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|---|---------------------|-----------------|--|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M2:7. AMCH PMO in collaboration with the CCAC will conduct consumer focus groups and surveys regularly to understand the level of patient engagement and PCP utilization.   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M3:1. CQAC will create a behavioral health subcommittee to ensure that mental health and substance abuse providers are participating in the IDS.   |                     | Project         |  | Completed | 10/12/2015          | 09/30/2016        | 10/12/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:2. Based on the protocols in place, AMCH PMO will analyze monthly utilization data by provider group to determine whether patients have utilized services and are active in care. In addition, systems will be developed to ensure referrals to necessary appointments are made, results are communicated promptly, missed appointments are identified and proactive steps are made to access necessary care. |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:3. AMCH PMO will track the utilization patterns of the IDS to ensure that partnering providers are accessing the system platform.   |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:4. Based off of the Salient Interactive Minor tool, the AMCH PMO will review provider specific data monthly to determine mental health providers with high Medicaid claims, patient utilization and engagement in care.   |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M4:1. AMCH PMO in collaboration with the WCC will provide training regarding IDS protocols and processes.  |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #4</b><br>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.  | DY2 Q2              | Project         | N/A  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Primary Care Provider (PCP)</u> | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Providers Associated with Completion:**

Assevero Anna-Maria D Md; Bala Virinchi; Baldini Gleda P Md; Brown Sheryl; Clark Catherine Nielsen; Ditursi Mary Kathleen Williams; Harde Hasumukh C Md; Hechanova Arnel B Md; James Philip C Md; Kelleher Ruth Ellen; Litwa Wallin J Do; Mack Brigid; Madala Padmaja Md; Manjunath Kallanna Md; Miller Marilyn; O'Brien Joanne Elizabeth; Owen Claudina; Paeglow Robert John Md; Ray David Allan Md; Sacco Joseph P Md; Sgarlata Donna L; Sheehan Rebecca; Signor Connie J; Stein Rhonda Danielle Md; Stetzer Lee; Tomiak Henry P Jr Md; Vasquez Deborah A Md; Young Linda; Zeltner Theodore Harold Md



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|--|---------------------|-----------------|--|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Task<br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Non-Primary Care Provider (PCP)</u> | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Bailey Laura M; Burns Lisa Marie; Cavaliere Rosella Md; Chank Shelly M; Ciccateri Ruth A; Dodd Jack Edward Jr; Drzymalski Jolanta; Ehrenberg Eileen; Fields Jennifer L; Friedman Cynthia Susan; Gara Maureen; Gsell Jennifer Lee; Guccione Angela Lee Md; Hausman Julia H; Heysler Rebecca A Np; Hinds Marcel Eldon Md; Hollowell Jean Gaye Md; Kamenir Steven A Md; Kang Harriet Md; Kee Elaine F; Lawlor Pamela J; Marici Edward M Do; Martin Mary Anne; Mason Appleton Adams Iii; Miller Nelson L Md; Murawski Julie Lynn; Nordhauser Micaela Urbano; Pliscosky Gail; Priest Michael Richard; Riccio Alexandra; Rizzo Christopher J Md; Roldan Ernesto; Samenfeld-Specht James; Scherer Harvey D; Steindler Jason Harrison; Suna Carla Joyce; Weinberg Gerard Md; Williams Marguerite H; Wintle Catherine Ann |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Task<br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Hospital</u>                                       | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Albany Medical Ctr Hospital; Columbia Memorial Hospital  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Task<br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Mental Health</u>                                  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Albany Cnty Dept Child Family; Albany Medical Ctr Hospital; Columbia Memorial Hospital; Dodd Jack Edward Jr; Ehrenberg Eileen; Mha Of Columbia-Greene Mh; Nordhauser Micaela Urbano; Northeast Parent Child Societ; P R O M E S A; Parsons Child And Family Ctr; Priest Michael Richard; Rehabilitation Supp Svcs C; Roldan Ernesto; Samenfeld-Specht James; Scherer Harvey D; Ulster-Greene Arc   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Task<br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Nursing Home</u>                                   | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Albany County Nursing Home; Kaaterskill Care Skilled Nrs & Reh; St Margarets Center  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Task<br>PPS uses alerts and secure messaging functionality.  |                     | Project         |  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| Task<br>M1:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee.  |                     | Project         |  | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| Task<br>M1:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.  |                     | Project         |  | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:3. Work with participating providers, not currently using EHRs, to incentivize EHR adoption for patient care management.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.   |                     | Project         |               | Completed | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Utilizing the IT-TOM pilot experience, design the PPS-wide future state connectivity model.   |                     | Project         |               | Completed | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.   |                     | Project         |               | Completed | 02/12/2016          | 09/30/2016        | 02/12/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.   |                     | Project         |               | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. Perform a current state assessment on the interconnected systems' ability to send, receive and use alerts and secure messages to facilitate timely care coordination and management.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Define the future state and select appropriate vendor for implementation of alerts and secure messaging functionality by clinicians and staff across the Integrated Delivery System for safe and effective care transitions between EDs, hospitals, specialists and PCMH sites. |                     | Project         |               | Completed | 12/05/2015          | 06/27/2016        | 12/05/2015 | 06/27/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:3. Conduct a gap analysis between current state and future state of using alerts and secure messaging functionalities for timely care coordination.  |                     | Project         |               | Completed | 02/12/2016          | 09/30/2016        | 02/12/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:4. Implement training and secure messaging to support the use of alerts across the PPS.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:5. Implement the necessary technical and operational system changes as required by the selected vendor for the use of alerts and secure messaging across the PPS.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| <b>Milestone #5</b><br>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.  | DY2 Q2              | Project         | N/A   | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).   |                     | Project         |   | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.   |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.   |                     | Project         |   | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Develop a practice-specific action plan to implement necessary changes to workflows and documentation to improve performance on achieving the MU Stage 2 requirements.   |                     | Project         |   | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Ensure clinician and staff training on new processes is conducted.   |                     | Project         |   | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.  |                     | Project         |   | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of NCQA 2014 Level 3 PCMH recognition or APCM by DY3.   |                     | Project         |   | In Progress | 10/19/2015          | 03/31/2018        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving NCQA 2014 Level 3 PCMH recognition or APCM.  |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home, as well as current certifications. |                     | Project         |   | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b>   |                     | Project         |   | In Progress | 07/01/2016          | 03/31/2018        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M2:4. Perform a practice-specific gap analysis to determine the needed financial, technical and operational support needed to ensure successful recognition by DY3.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:5. Based on the gap analysis, establish priorities and develop a practice-specific action plan to achieve the recognition and transform the care delivery model.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA 2014 Level 3 certified or APCM.             |                     | Project         |               | In Progress | 12/07/2015          | 03/31/2018        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:7. Assign to participating practice leadership, specific roles, responsibilities and timelines to implement the action plan effectively and achieve the recognition by DY 3.                               |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:8. Monitor progress on a monthly basis to evaluate and assess needed additional resources to support practice transformation.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:9. Track site-specific certification to assure all participating safety-net providers become NCQA 2014 Level 3 PCMH certified or APCM.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #6</b><br>Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.                         | DY2 Q2              | Project         | N/A           | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.   |                     | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. The EHR sub-committee will articulate the scope, objectives and requirements of an effective patient tracking system to support an effective population health management strategy across PPS entities. |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |



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|--|---------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |  | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Establish a central resource to support the needs of the PPS and individual organizations/practices to track their population groups for population health management needs.  |                     | Project         |  | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |  | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #7</b><br>Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3. | DY2 Q2              | Project         | N/A  | In Progress | 08/15/2015          | 03/31/2018        | 08/15/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Primary care capacity increases improved access for patients seeking services - particularly in high-need areas.  |                     | Project         |  | Completed   | 08/15/2015          | 09/30/2016        | 08/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>All eligible practices meet 2014 NCQA Level 3 PCMH and/or APCM standards.   |                     | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 08/15/2015          | 03/31/2018        | 08/15/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria.)  |                     | Project         |  | Completed   | 08/15/2015          | 09/30/2016        | 08/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Analyze PHI data, Salient Interactive Minor, and the CNA to identify current utilization patterns, high-risk areas and sites where the attributed patients receive primary care services.   |                     | Project         |  | Completed   | 08/15/2015          | 09/30/2016        | 08/15/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Create and complete a comprehensive provider readiness tool to assess infrastructure, capacity, workforce, data security, and PCMH status to ensure patient accessibility.  |                     | Project         |  | Completed   | 10/19/2015          | 09/30/2016        | 10/19/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Identify gaps in capacity and services rendered to determine strategies to address health disparities in high need areas and capacity shortages across the PPS network.   |                     | Project         |  | Completed   | 11/02/2015          | 09/30/2016        | 11/02/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b>  |                     | Project         |  | Completed   | 02/05/2016          | 09/30/2016        | 02/05/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |





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| M1:4. Collaborate with overlapping PPSs to evaluate network capacity across the region to coordinate patient needs.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Monitor capacity in PCP sites to ensure that patients seeking services have improved access to care.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. AMCH PMO and PPS partners will identify opportunities to increase access, particularly in communities most underserved, through innovative funding strategies and workforce development.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM by DY3.   |                     | Project         |               | In Progress | 10/19/2015          | 03/31/2018        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:2. Implement training sessions for senior leaders, clinicians, and staff to learn about the benefits of achieving NCQA 2014 Level 3 PCMH recognition or APCM.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home, as well as current certifications. |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:4. Perform a practice-specific gap analysis to determine the financial, technical, and operational support needed to ensure successful recognition by DY3.  |                     | Project         |               | In Progress | 07/01/2016          | 03/31/2018        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:5. Based on the gap analysis, AMCH PMO will establish priorities and develop a practice specific action plan to achieve and transform the care delivery model.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA Level 3 certified or APCM.   |                     | Project         |               | In Progress | 12/07/2015          | 03/31/2018        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:7. Assign specific roles and responsibilities for the participating practice leadership, and timelines to implement the action plan effectively, and achieve the recognition by DY3.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| <b>Task</b><br>M2:8. Monitor progress on a monthly basis to evaluate needed additional resources to support practice transformation.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:9. Track site-specific certification to ensure all participating safety-net providers become Level 3 PCMH certified or APCM.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:1. Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M3:2. Develop a practice-specific action plan to implement necessary changes to workflows to improve performance on achieving the MU Stage 2 requirements.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:3. Ensure clinician and staff training on new processes is conducted.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:4. Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #9</b><br>Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.  | DY2 Q2              | Project         | N/A           | Completed | 07/06/2015          | 09/30/2016        | 07/06/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS holds monthly meetings with Medicaid Managed Care plans to evaluate utilization trends and performance issues and ensure payment reforms are instituted.  |                     | Project         |               | Completed | 07/06/2015          | 09/30/2016        | 07/06/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with AMCH Integrated Delivery Systems Department, will discuss utilization trends, performance issues, and payment reform during monthly meetings with managed care organizations. |                     | Project         |               | Completed | 10/26/2015          | 09/30/2016        | 10/26/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. AMCH PMO will engage Medicaid MCOs in broader areas of concern to the PPS, including financial sustainability, risk sharing, and compliance with competitive behaviors.                                       |                     | Project         |               | Completed | 07/06/2015          | 09/30/2016        | 07/06/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #10</b><br>Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.  | DY2 Q2              | Project         | N/A           | Completed | 09/30/2015          | 09/30/2016        | 09/30/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS submitted a growth plan outlining the strategy to evolve  |                     | Project         |               | Completed | 09/30/2015          | 09/30/2016        | 09/30/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

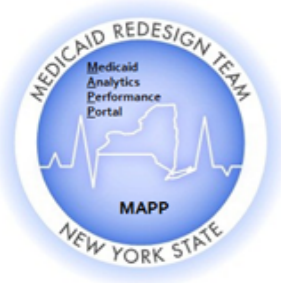


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| provider compensation model to incentive-based compensation   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Providers receive incentive-based compensation consistent with DSRIP goals and objectives.   |                     | Project         |               | Completed | 09/30/2015          | 09/30/2016        | 09/30/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO will analyze relevant documentation and information to understand compensation related to patient diagnosis and outcomes.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. AMCH PMO will draw on the expertise of existing and future partners regarding risk-based arrangements and population-health management to move toward VBP reform.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. AMCH PMO will develop a strategic roadmap to transition compensation from current RVU-based models to performance based models that address ways to incentivize behavior to facilitate the change. The resulting plan will involve finance, practitioners and payers to restructure to incentive-based compensation across the provider network. |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. On a quarterly basis, AMCH PMO will analyze organizational performance and patient outcomes to determine the amount of incentive-based payments to be disseminated to organizations who meet or exceed DSRIP goals and objectives.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:2. AMCH Finance Committee will monitor incentive payments to adhere to the funds flow model in order to appropriately distribute funds consistent with achieved values across the provider network.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #11</b><br>Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as appropriate.   | DY2 Q2              | Project         | N/A           | Completed | 08/10/2015          | 09/30/2016        | 08/10/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Community health workers and community-based organizations utilized in IDS for outreach and navigation activities.   |                     | Project         |               | Completed | 08/10/2015          | 09/30/2016        | 08/10/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH WCC will define a target workforce state in line with the DSRIP program goals for community health workers and community based organizations.   |                     | Project         |               | Completed | 08/10/2015          | 10/31/2015        | 08/10/2015 | 10/31/2015 | 12/31/2015       | DY1 Q3                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:2. AMCH WCC will assess the current capabilities and systems in place for providing community health worker/community based organization services for outreach and navigation activities.  |                     | Project         |               | Completed | 08/24/2015          | 10/31/2015        | 08/24/2015 | 10/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. AMCH WCC will create a workforce transition roadmap based on the identified gaps to align and build community health worker capacity to meet the outreach and navigation needs.   |                     | Project         |               | Completed | 02/15/2016          | 09/30/2016        | 02/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. AMCH PMO will evaluate patient satisfaction with community outreach and navigation services to modify the delivery system as necessary and appropriate.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Working with CBOs, the CCAC, CCHLC and WCC, the AMCH PMO will develop a culturally appropriate project-based care coordination team that may include care navigators, peer educators, and/or community health workers for outreach and navigation activities. |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. Based on the identified needs of the engaged patients, the CCAC will develop a community engagement plan that will include key community stakeholders and discuss action steps necessary to ensure patients are engaged in the IDS.                           |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| 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. |                |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.  |                |
| Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.   |                |
| 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. |                |
| 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.   |                |
| Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.   |                |
| Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.   |                |
| Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.  |                |
| Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.   |                |
| Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as appropriate.   |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments  |
|--------------|-----------------|---|
| Milestone #1 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #2 | Pass & Complete |   |
| Milestone #3 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #4 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #5 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |



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**Milestone Review Status**

| <b>Milestone #</b>   | <b>Review Status</b> | <b>IA Formal Comments</b>   |
|----------------------|----------------------|---|
| <b>Milestone #6</b>  | Pass & Complete      |   |
| <b>Milestone #7</b>  | Fail                 | The PPS did not complete this milestone by the prescribed deadline. |
| <b>Milestone #9</b>  | Fail                 | The PPS did not complete this milestone by the prescribed deadline. |
| <b>Milestone #10</b> | Pass & Complete      |   |
| <b>Milestone #11</b> | Pass & Complete      |   |



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**✔ IPQR Module 2.a.i.3 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**IPQR Module 2.a.i.4 - IA Monitoring**

**Instructions :**





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**Project 2.a.iii – Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services**

**✓ IPQR Module 2.a.iii.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

A risk associated with the health home at-risk intervention project is a lack of health homes within our PPS network. We intend to mitigate this risk by working collaboratively with the many health home service providers that are part of our network, as well as collaborating closely with neighboring PPSs to meet the needs of our attributed patients.

A more concrete risk to this project is the delays associated with patient identification and risk stratification. Significant data will be needed from the state which remains behind schedule. Additionally, the state is still in the process of conducting the OPT OUT process. This process further delays the ability of our PPS to communicate patient lists generated from state provided data. We will mitigate this by working collaboratively to develop risk stratification and patient identification strategies that do not rely on the data coming from the Department of Health.

Another risk is lack of engagement by practitioners and leaders of the participating providers. Currently most healthcare practitioners and health systems function as silos and have not changed their systems due to current payment systems, or market share dominance. Without their active participation in our efforts to redesign the delivery system, we will face substantial hurdles in implementing project 2.a.iii effectively.

Strong linkages to Level 3 PCMH primary care sites are essential to the success of this project. Inability of the primary care practices to achieve this recognition will create additional hurdles. The current culture among practitioners is a barrier to integration of physical and behavioral health care services. The current lack of integration compromises the care of individuals with comorbid behavioral health and chronic medical conditions. A lack of sufficient care coordination services is also a risk. Failure to create a functional centralized triage system with effective care coordination will put this project at risk.

To mitigate this risk, we will:

- Create teams, led by practicing clinician stakeholders that will develop protocols and clinical pathways using evidence-based standards of care and monitoring of clinical performance.
- With a dedicated team of experts, AMCH PPS will coach and support other primary care practitioners to achieve Level 3 PCMH.
- Provide training and lead a cultural shift across organizational boundaries to create a more collaborative, patient centered approach.
- Assist our partners with the transition towards value-based payments and away from traditional FFS models.
- Create a centralized triage function in connection with our expanded Care Management capabilities. We intend to also expand our PPSs capacity for care management.

Another risk to the successful implementation of this project is the reliance on new IT and communications infrastructure, which is needed to support communication between practitioners and organizations. The IT and data sharing survey that we carried out prior to our DSRIP application revealed that the partners within our PPS are at differing levels of IT capabilities and are on differing platforms, creating risks to integration.

Existing IT infrastructure is inadequate to support a region-wide interoperable system, and a comprehensive patient registry. Rolling out new tools for data sharing while trying to establish new lines of communication to coordinate care will be a complex challenge. To mitigate this risk, we will collaborate with HIT vendors as well as participating providers to redesign and implement clinical IT and data sharing systems.



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**✔ IPQR Module 2.a.iii.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY2,Q4                 | 15,836                 |

|                     | Year,Quarter             | DY2,Q1 | DY2,Q2 | DY2,Q3 | DY2,Q4 |
|---------------------|--------------------------|--------|--------|--------|--------|
| <b>PPS Reported</b> | Baseline Commitment      | 9,478  | 9,977  | 12,907 | 15,836 |
|                     | Quarterly Update         | 5,645  | 5,823  | 5,823  | 6,200  |
|                     | Percent(%) of Commitment | 59.56% | 58.36% | 45.12% | 39.15% |
| <b>IA Approved</b>  | Quarterly Update         | 0      | 225    | 0      | 370    |
|                     | Percent(%) of Commitment | 0.00%  | 2.26%  | 0.00%  | 2.34%  |

**⚠ Warning: PPS Reported - Please note that your patients engaged to date (6,200) does not meet your committed amount (15,836) for 'DY2,Q4'**

**Current File Uploads**

| User ID  | File Type | File Name   | File Description                         | Upload Date         |
|----------|-----------|---|--|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ2aiii_MDL2aiii2_PES_TRAIN_AMCH_PPS__2_A_III_FINAL_FOR_MAP P_UPLOAD_12204.xlsx | AMCH PPS _2_A_III_ FINAL FOR MAPP UPLOAD | 04/25/2017 02:14 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments   |
|---------------|--|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4 |



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**✅ IPQR Module 2.a.iii.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.  | DY2 Q4              | Project         | N/A           | Completed | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>A clear strategic plan is in place which includes, at a minimum:<br>- Definition of the Health Home At-Risk Intervention Program<br>- Development of comprehensive care management plan, with definition of roles of PCMH/APC PCPs and HHs |                     | Project         |               | Completed | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Identify participating provider and/or sites, including but not limited to Health Home providers, PCPs, EDs, CBOs, Social Service agencies and care coordination providers.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Establish committee whose mission is the preparation of a HH At-Risk comprehensive management plan including identified staff and organizational roles.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Identify areas for collaboration with neighboring PPSs and ensure collaboration between related PPS project.   |                     | Project         |               | Completed | 11/23/2015          | 12/31/2015        | 11/23/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4. Complete a current state assessment of the HH at-risk population to determine the care coordination needs and availability of CC services.   |                     | Project         |               | Completed | 11/02/2015          | 06/30/2016        | 11/02/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:5. Identify/hot spot HH at-risk populations in the 5 counties for the PPS.  |                     | Project         |               | Completed | 11/02/2015          | 06/30/2016        | 11/02/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:6. Define future state for the HH at-risk intervention program utilizing hot spotting and current state assessment.   |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:7. Complete gap analysis between the current state assessment and defined future state.   |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b>   |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type                              | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:8. Utilizing gap analysis and future state modeling, the ad-hoc committee will develop a strategic plan that includes the definition of the HH at-risk intervention program, the development of a care management plan and definition of the management plan and the roles of the identified providers and organizations. |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:9. Submit the HH at-risk intervention program to the PPS Board for review and approval.  |                     | Project         |  | Completed   | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #2</b><br>Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3.                                    | DY2 Q4              | Project         | N/A  | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>All eligible practices meet NCQA 2014 Level 3 PCMH and APCM standards   |                     | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM by DY 3.   |                     | Project         |  | In Progress | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQA Level 3 PCMH recognition or APCM.   |                     | Project         |  | In Progress | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current certifications.                               |                     | Project         |  | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4. Perform a practice-specific gap analysis to determine the needed financial, technical and operational support to assure successful recognition by DY3.  |                     | Project         |  | In Progress | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.   |                     | Project         |  | In Progress | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b>  |                     | Project         |  | In Progress | 12/07/2015          | 03/31/2017        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type  | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA Level 3 certified or APCM.  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:7. Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY 3.   |                     | Project         |  | In Progress | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:8. Monitor on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.   |                     | Project         |  | In Progress | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #3</b><br>Ensure that all participating 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. | DY2 Q4              | Project         | N/A  | Completed   | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Primary Care Provider (PCP)</u>     | Completed   | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| Assevero Anna-Maria D Md  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Non-Primary Care Provider (PCP)</u> | Completed   | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| Bailey Laura M  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Case Management / Health Home</u>                  | Completed   | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| Clearview Center Mh; Columbia Cty Mh Ctr Mh; Mha Of Columbia-Greene Mh; Parsons Child And Family Ctr; Rehabilitation Supp Svcs C; Transitional Svcs Assoc Inc; Visiting Nurs Svc/Schtd & Sar Cnty   |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS uses alerts and secure messaging functionality.  |                     | Project         |  | Completed   | 06/01/2015          | 03/31/2017        | 06/01/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and  |                     | Project         |  | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Work with participating providers, not currently using EHRs, to incentivize EHR adoption for patient care management.  |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.  |                     | Project         |               | Completed | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Utilizing the IT-TOM pilot experience, design the PPS wide future state connectivity model.  |                     | Project         |               | Completed | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.  |                     | Project         |               | Completed | 02/12/2016          | 03/31/2017        | 02/12/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.  |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Perform a current state assessment on the interconnected systems' ability to send, receive and use alerts and secure messages to facilitate timely care coordination and management.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Define the future state and select appropriate vendor for implementation of alerts and secure messaging functionality by clinicians and staff across the Integrated Delivery System for safe and effective care transitions between EDs, Hospitals, specialists and PCMH site. |                     | Project         |               | Completed | 12/05/2015          | 06/27/2016        | 12/05/2015 | 06/27/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:3. Conduct a gap analysis between current state and future state of using alerts and secure messaging functionalities for   |                     | Project         |               | Completed | 02/12/2016          | 03/31/2017        | 02/12/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type   | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| timely care coordination.   |                     |                 |   |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:4. Implement training and secure messaging to support the use of alerts across the PPS.   |                     | Project         |   | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:5. Implement the necessary technical and operational system changes as required by the selected vendor for the use of alerts and secure messaging across the PPS.                                 |                     | Project         |   | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #4</b><br>Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.   | DY2 Q4              | Project         | N/A   | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).   |                     | Project         |   | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.   |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.   |                     | Project         |   | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Develop practice specific action plan to implement necessary changes to workflows and documentation to improve performance on achieving the MU Stage 2 requirements.                           |                     | Project         |   | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:3. Ensure clinician and staff training on new processes is conducted.   |                     | Project         |   | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:4. Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.  |                     | Project         |   | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:1 Establish a project sub-committee with representation from participating primary care practitioners to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM by DY 3. |                     | Project         |   | In Progress | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQA  |                     | Project         |   | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Level 3 PCMH recognition or APCM.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current certifications. |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:4. Perform a practice-specific gap analysis to determine the needed financial, technical and operational support to assure successful recognition by DY3.  |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA Level 3 certified or APCM.  |                     | Project         |               | In Progress | 12/07/2015          | 03/31/2017        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:7. Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY 3.  |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:8. Monitor on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.  |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #5</b><br>Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.   | DY2 Q4              | Project         | N/A           | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.   |                     | Project         |               | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH EHR sub-committee will articulate the scope, objectives and requirements of an effective patient tracking system to support effective population health management across PPS entities.  |                     | Project         |               | Completed   | 04/02/2016          | 03/31/2017        | 04/02/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b>  |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |





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|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:2. AMCH PMO will assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. AMCH PMO will implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. AMCH PMO will establish a central resource to support the needs of the PPS and individual organizations/practices to track their population groups for population health management needs.      |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #6</b><br>Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.   | DY2 Q4              | Project         | N/A           | Completed | 11/02/2015          | 03/31/2017        | 11/02/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Procedures to engage at-risk patients with care management plan instituted.   |                     | Project         |               | Completed | 11/02/2015          | 03/31/2017        | 11/02/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Identify HH at-risk patient risk factors based on the current state analysis and hot spotting.  |                     | Project         |               | Completed | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Identify nationally recognized best practice evidence-based care management plans.  |                     | Project         |               | Completed | 11/02/2015          | 06/30/2016        | 11/02/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:3. Complete plan development using identified best practice evidence-based care management plans, gap analysis and future state model.   |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Develop training materials required to implement Health Home at-risk action plan buy-in at the provider level and implement this training.  |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:5. Develop care management documentation and protocols, necessary policies and procedures, and a comprehensive action plan, to engage targeted patient population and reduce patient risk factors. |                     | Project         |               | Completed | 09/30/2016          | 03/31/2017        | 09/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|---|---------------------|-----------------|---|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #7</b><br>Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.  | DY2 Q4              | Project         | N/A   | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Each identified PCP establish partnerships with the local Health Home for care management services.  |                     | Provider        | <u>Practitioner - Primary Care Provider (PCP)</u> | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b><br>Abigail R Watson  |                     |                 |   |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Each identified PCP establish partnerships with the local Health Home for care management services.  |                     | Provider        | <u>Case Management / Health Home</u>              | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b><br>Aids Council Of Neny Ai   |                     |                 |   |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. Identify the participating project PCPs, Health Homes such as Hudson River Health, and other Health Home downstream providers.   |                     | Project         |   | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Define care management roles and responsibilities for each Health Home and participating provider.   |                     | Project         |   | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Establish partnership agreements with PCPs, HH providers, EDs and CBOs as necessary. Agreements to include information sharing requirements as necessary for care coordination.  |                     | Project         |   | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #8</b><br>Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments). | DY2 Q4              | Project         | N/A   | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS has established partnerships to medical, behavioral health, and social services.   |                     | Provider        | <u>Practitioner - Primary Care Provider (PCP)</u> | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b><br>Abigail R Watson  |                     |                 |   |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS has established partnerships to medical, behavioral health,  |                     | Provider        | <u>Case Management /</u>                          | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| and social services.   |                     |                 | Health Home   |           |                     |                   |            |            |                  |                                  |
| <b>Providers Associated with Completion:</b>   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| Aids Council Of Neny Ai  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS uses EHRs and HIE system to facilitate and document partnerships with needed services.  |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Established project sub-committee will identify the participating project PCPs, Health Home providers, CBOs, local Health Departments, OMH and OASAS licensed providers, LGUs and SPOAs.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Utilize current state assessment, future state model and gap analysis to identify the needed care management services of the participating PCPs and HHs.  |                     | Project         |               | Completed | 09/30/2016          | 03/31/2017        | 09/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Identify current PPS providers that have existing PCP and HH resources that could be expanded to fill the gap.  |                     | Project         |               | Completed | 11/02/2015          | 09/30/2016        | 11/02/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Establish partnership agreements that define policies and procedures and care coordination between the PCPs and HHs with the PPS medical, behavioral health and social service providers for the allocation of needed PCP and HH resources. |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Collaborate with TDMC to identify baseline EHR/referral workflow capabilities within participating provider organizations. This survey will include connectivity to HIE.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Collect and review participating provider EHR vendor documentation and facilitate obtaining documentation when missing.   |                     | Project         |               | Completed | 10/05/2015          | 06/30/2016        | 10/05/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:3. Establish standards for reporting EHR documentation of referrals to needed services.  |                     | Project         |               | Completed | 07/01/2016          | 03/31/2017        | 07/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:4. Participating PPS providers will report on and document partnerships for needed services using EHRs and the HIE system.   |                     | Project         |               | Completed | 09/30/2016          | 03/31/2017        | 09/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #9</b><br>Implement evidence-based practice guidelines to address risk  | DY2 Q4              | Project         | N/A           | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.                            |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS has adopted evidence-based practice guidelines for management of chronic conditions. Chronic condition appropriate evidence-based practice guidelines developed and process implemented. |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Regularly scheduled formal meetings are held to develop collaborative evidence-based care practices.   |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS has included social services agencies in development of risk reduction and care practice guidelines.   |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Culturally-competent educational materials have been developed to promote management and prevention of chronic diseases.   |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Review and validate CNA data with participating providers to identify the most prevalent chronic conditions based on additional data and expertise of stakeholders.                    |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Project sub-committee, in collaboration with CQAC, will identify Nationally recognized evidence-based guidelines for the management of the identified Chronic conditions.              |                     | Project         |               | Completed | 11/02/2015          | 03/31/2017        | 11/02/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Submit identified chronic condition guidelines to the CQAC for review and adoption.  |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Disseminate guidelines while providing appropriate provider level training and education for implementation.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:5. AMCH PPS participating providers will adopt identified guidelines.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Identify all participating providers engaged in partnerships for this project to regularly join project subcommittee and/or CQAC meetings to review evidence based practices.          |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Assist project participating providers to develop and implement evidence-based care practices where appropriate.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |

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| <b>Task</b><br>M3.1. Identify Social Services agencies in the PPS five county service area to participate in project subcommittee and PPS PAC meetings where relevant. |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M3.2. Establish appropriate written agreements with Social Service Agencies.  |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M3.3. PPS develops risk-reduction and evidence-based care practices with identified Social Services Agencies.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M3.4. Risk reduction and evidence-based care practices will be presented to CQAC for approval when appropriate.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M4.1. Collaborate with CCHLC to identify training vendor to supply educational materials on management of chronic diseases.                             |                     | Project         |               | Completed | 11/16/2015          | 09/30/2016        | 11/16/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M4.2. Review identified trainings with clinical stakeholders as well as CCAC for understanding.   |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M4.3. Disseminate training materials as appropriate.  |                     | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type                         | File Name  | Description                                    | Upload Date         |
|--|---------|-----------------------------------|--|--|---------------------|
| Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.  | mcintyc | Other                             | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES1_OTH_2aiii_Milestone_1_final_remediation_submission_15319.pdf | 2aiii Milestone 1 final remediation submission | 06/19/2017 11:27 AM |
|  | mcintyc | Other                             | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES1_OTH_Milestone_1_Supporting_Documentation_13039.pdf           | Milestone 1 Supporting Documentation           | 04/26/2017 02:44 PM |
| Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3. | mcintyc | Other                             | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES2_OTH_BHNNY_2aiii_M2_Remediation_15320.pdf                     | BHNNY 2aiii M2 Remediation                     | 06/19/2017 11:28 AM |
|  | mcintyc | Templates                         | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES2_TEMPL_BHNNY_PCMH_Provider_List_13053.pdf                     | BHNNY PCMH Provider List                       | 04/26/2017 02:47 PM |
| Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including  | mcintyc | EHR/HIE Reports and Documentation | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES3_EHR_Copy_of_2aiii_MS3_14067.xlsx                             | Milestone 3 2aiii provider list                | 04/28/2017 08:50 AM |
|  | mcintyc | EHR/HIE Reports and Documentation | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES3_EHR_BHNNY_Alerts_PCP_and_CMV2_13827.pdf                      | BHNNY Alerts PCP and CMV2                      | 04/27/2017 12:51 PM |



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**DSRIP Implementation Plan Project**

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**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type                   | File Name   | Description  | Upload Date         |
|--|---------|-----------------------------|---|--|---------------------|
| direct exchange (secure messaging), alerts and patient record look up.   |         |                             |   |  |                     |
| Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.   | mcintyc | Other                       | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES4_OTH_BHNNY_2aiii_M4_Remediation_15321.pdf                                | BHNNY 2aiii M4 Remediation                                 | 06/19/2017 11:29 AM |
|  | mcintyc | Other                       | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES4_OTH_BHNNY_PCMH_Provider_List_13062.pdf                                  | BHNNY_PCMH_Provider_List                                   | 04/26/2017 02:51 PM |
| Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  | mcintyc | Other                       | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES5_OTH_2.a.iii_Milestone_5_Supporting_Documentation_15703.pdf              | 2.a.iii Milestone 5 Remediation Supporting Documentation   | 06/20/2017 09:58 AM |
|  | mcintyc | Other                       | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES5_OTH_2.a.iii_milestone_5_final_narrative_15702.pdf                       | 2.a.iii milestone 5 remediation final narrative            | 06/20/2017 09:57 AM |
|  | mcintyc | Templates                   | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES5_TEMPL_Population_Health_Registries_13079.pdf                            | Population Health Registries                               | 04/26/2017 02:58 PM |
| Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES6_DOC_BHNNY_2aiii_Milestone_6_13830.pdf                                   | BHNNY 2aiii Milestone 6                                    | 04/27/2017 12:53 PM |
| Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.  | mcintyc | Rosters                     | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES7_ROST_Copy_of_Milestone_7_14064.xlsx                                     | Milestone 7 provider list                                  | 04/28/2017 08:40 AM |
|  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES7_DOC_BHNNY_2aiii_Milestone_7_13833.pdf                                   | BHNNY 2aiii Milestone 7                                    | 04/27/2017 12:55 PM |
| Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments). | mcintyc | Rosters                     | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES8_ROST_Copy_of_Milestone_8_14063.xlsx                                     | milestone 8 provider list                                  | 04/28/2017 08:30 AM |
|  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES8_DOC_BHNNY_HHARI_EHR_Cert_metric_2_13916.pdf                             | BHNNY HHARI EHR Cert metric 2                              | 04/27/2017 02:29 PM |
|  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES8_DOC_BHNNY_2aiii_Milestone_8_Metric_1_13915.pdf                          | BHNNY 2aiii Milestone 8 Metric 1                           | 04/27/2017 02:29 PM |
| Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.              | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_MM_Metric_4_-_Patient_Education_Documents_and_Approval_Emails_13105.pdf | Metric 4 - Patient Education Documents and Approval Emails | 04/26/2017 03:15 PM |
|  | mcintyc | Training Documentation      | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_TRAIN_Metric_3_-_Lead_Program_and_Trainings_13104.pdf                   | Metric 3 - Lead Program and Trainings                      | 04/26/2017 03:15 PM |
|  | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_MM_Metric_2_-_Meetings_Agendas_Minutes_Guideline_Approval_13103.pdf     | Metric 2 - Meetings Agendas_Minutes Guideline Approval     | 04/26/2017 03:14 PM |
|  | mcintyc | Training Documentation      | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_TRAIN_Metric_1_-3_Partner_Trainings_Asthma_13102.pdf                    | Metric 1 -3 Partner Trainings Asthma                       | 04/26/2017 03:13 PM |
|  | mcintyc | Training Documentation      | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_TRAIN_Metric_1_-2_-_Partner_Training_Hypertension_13101.pdf             | Metric 1 -2 - Partner Training Hypertension.               | 04/26/2017 03:12 PM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type           | File Name   | Description                       | Upload Date         |
|----------------|---------|---------------------|---|-----------------------------------|---------------------|
|                | mcintyc | Policies/Procedures | 1_DY2Q4_PROJ2aiii_MDL2aiii3_PRES9_P&P_Metric_1_-1_-_Approved_Guidelines_13099.pdf | Metric 1 -1 - Approved Guidelines | 04/26/2017 03:11 PM |

**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text  |
|--|---|
| Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.  | <p>In December 2016, BHNNY and the Health Home At-Risk Project Subcommittee outlined the Health Home At-Risk Program document that will help guide the future implementation of this project beyond milestone completion.</p> <p>The HH At-Risk Program consists of a 5-domain approach including 1) primary care engagement, 2) health home care management program engagement, 3) community service provider engagement, 4) information technology and 5) patient engagement.</p> <p>In order to meet the project objectives of expanding access to primary care services and developing integrated care teams composed of multi-disciplinary members, the PPS placed an emphasis on engaging community-based primary care as part of the HH At-Risk Program.</p> <p>This document explains how information technology is imperative for successful implementation of care management services. Partners stated IT limitations as their main concern in initiating care management services for patients. In addition, limited availability of behavioral health appointments and duplication of services, were discussed with appropriate mitigation strategies.</p> <p>The document was reviewed and approved by the HH At-Risk Subcommittee and the Clinical and Quality Affairs Committee.</p> <p>In March 2017 BHNNY contracted with four care management agencies (CMAs) to begin implementation of a centralized care management system for health home at-risk patients in the PPS. BHNNY then facilitated contracts between these CMAs and PCMH practices and hospitals in the PPS. A referral process was created with input from the PMO staff, CMAs, and primary care practices.</p> <p>Primary care and hospital staff were trained on identifying patients to refer to Health Homes or to BHNNY Cares based on the qualifying criteria as defined by NYS. In addition to referring to the CMAs for care management services, a process was put into place to refer eligible patients to Health Homes as it is a key component of the project. Once identified, the patients are referred to the appropriate entity.</p> <p>For at-risk patients, the PCMH or hospital staff begins a standardized care plan created for the PPS. Once the relevant information is complete, the care plan is sent as part of the referral to BHNNY Cares. Once referred, the CMAs provide appropriate services for up to six months to at-risk patients to reduce the patient's risk or ultimately transfer them to a health home depending on the patient's situation. The care plan is updated regularly and shared with the patient's PCP as appropriate.</p> <p>As IT was identified as the largest challenge in implementing BHNNY Cares by stakeholders, the PPS is working with Hixny and planning on implementing both a Care Coordination and analytics platform within the next six months to further enable data aggregation, risk stratification and care coordination services across the PPS.</p> |
| Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3. | <p>While considerable progress has been made toward the achievement of practices transforming from 2011 to 2014 recognition and/or toward Advanced Primary Care (APC) accreditation, due to an aggressive speed and scale timeline commitment, BHNNY will not meet this milestone for March 2017. However, as we have now engaged HANYS PCMH Advisory Services and have meaningful partner commitment, we are very confident that we will meet the milestone in March 2018 as outlined by the DOH defined milestone date. Over the last year, many of our partners had begun efforts to transform their practices from 2011 to 2014 recognition. For example, Columbia Memorial Hospital transformed 12 of their 15 sites from 2011 to 2014 recognition. The achievements of NCQA Level 3 PCMH recognition for additional practice sites is evidenced in data source titled, Level 3 PCMH 2014 Certified Providers. BHNNY has provided several opportunities to assist partners toward the achievement of PCMH recognition. In January 2016, BHNNY performed a current-state assessment of all primary care partners to better understand the practices' current PCMH recognition status, as well as future plans toward recognition. In April of 2016 under the auspice of the CQAC, the first meeting of the Primary Care Advisory Group was held. One of the purposes of this work group formation were to promote active primary care participation in DSRIP projects; to facilitate and promote PCMH recognition and the adoption of standards in primary care. As an initial support strategy, in early July 2016, BHNNY supported more than 30 clinical and administrative leaders from participating organizations to attend the two-day training in Saratoga Springs, NY. This training was hosted by HANYS and sponsored by the PPS' Workforce Coordinating Council.</p> <p>In an effort to provide further assistance toward the achievement of recognition for our contracted primary care partners, the Health Care Association of New York State</p>  |



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|---|--|
|   | <p>(HANYS) was chosen as the vendor to support BHNNY in its transformation efforts. HANYS is also a technical assistance provider for Advanced Primary Care (APC). This dual designation will further strengthen transformation efforts on behalf of BHNNY. For partners who choose to obtain PCMH recognition, BHNNY has allocated funds to support two distinct trajectories called Tier I and Tier II. In Tier I our contracted partners chose one site that would benefit from one to one transformation support. In Tier II, BHNNY is providing all 11 primary care practices an opportunity to participate in group training/learning collaboratives. The PPS is also providing additional one to one support to identified practice sites that have limited resources which may make it more challenging for them to achieve recognition. In providing this additional support, BHNNY is confident that those practice sites will achieve recognition. The HANYS engagement will include a thorough current state assessment and gap analysis for Tier I participants as well as one on one training sessions, group learning collaboratives, train the trainer approach as well as a robust sustainability plan to ensure the maintenance of PCMH and/or APC. Additionally, the PPS has defined metrics as part of our Phase II funds flow distribution that support the PCMH standards must pass elements and critical factors which will assist practices with sustainability efforts once PCMH 2014 is achieved. With all of the outlined measures listed above, the PPS is confident that we will meet this metric by March 2018.</p>  |
| <p>Ensure that all participating 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.</p> | <p>Metric 1: The IT architecture BHNNY incorporates the following: PPS member must have a capable EHR, PPS member connects EHR to Hixny, PPS care management access to PPS EHR systems for clinical reviews, PPS care management solutions provide care plans and updates to caregivers through Hixny, and EHR data and care plans flow predominately through Hixny portal interaction. To support these concepts, all contracted safety-net PCPs, Non-PCPs, and Care Management Providers participating in project 2.a.iii have connected and signed QE agreements with Hixny (see supporting documentation). All Primary Care Providers participating in this project are currently sharing data and subscribe to alerts. In addition, all Care Management providers participating in the Health Home at Risk project have signed Hixny agreements as of 3/30/17. Members of the Health Home at Risk subcommittee have developed a model for sharing community care plans via Hixny and the PPS is in the process of implementing a Care Coordination platform. These community care plans will be made available to subscribed providers as part of the patient's Hixny community health record.</p> <p>Metric 2: Providers will utilize functionality within their certified systems to receive Hixny alerts and to communicate with other PPS partners. Care Management Providers without access to a certified system have become Hixny members which made them eligible for Direct accounts. Hixny Direct accounts allow providers whose EMR does not come equipped with a complete Direct transition of care module or Health Information Service Provider (HISP), as well as those without EHRs, to exchange health information with providers and patients securely.</p> <p>Examples of PPS alerts include: admission and discharge notifications, transfer between care settings notification – ED or inpatient, as well as the automated delivery of discharge summaries, transition of care summaries and ED reports. These alerts will be delivered to members of the care team as described in the project implementation plans. Recipients will include PCPs and Specialists, Behavioral Health Providers and Care Management Providers. BHNNY and Hixny remain committed to collaboratively work with each PPS partner to design the delivery method that best aligns with their particular workflow. Alerts can be integrated into the EHR, which is the preferred method, or provided via the Hixny Portal's Clinical Message Center (CMC).</p> <p>Data Examples have been included with to support this DSRIP Project include examples of the Hixny screenshots of partner Alerts for both PCPs and Care Managers participating in this project.</p> |
| <p>Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.</p>   | <p>Throughout DY1Q4, Better Health for Northeast New York (BHNNY), assisted by the consulting firm Accenture completed an IT current state assessment. Accenture conducted a thorough analysis within a sample of key partner organizations to outline current network capabilities for data sharing and the interoperability of systems. Utilizing this assessment, work has continued with all partners participating in PPS projects. Meaningful Use Stage 2 readiness and PCMH Level 3 requirements along with Hixny connectivity serve as the basis for Primary Care Provider's EHR configurations.</p> <p>A main priority of BHNNY is to create a community-based integrated delivery system that will incorporate all aspects of patient care needs. Integration and clinical data sharing among all members of the patient care team will enable providers to work together to avoid potentially preventable events and improve patient care. Utilizing a MU2 certified system offers the providers system functionality necessary to achieve this integration. MU2 certified systems also enable practices to align and document PCMH requirements. All of the PCP practices participating in project 2.a.iii (Center for Disability Services, Community Care Physicians, Capital Care, Albany Medical Center, Saratoga, and Columbia Memorial) are utilizing MU2 certified EHRs and are exchanging C-CDAs and clinical information with our RHIO Hixny. Copies of their EHR certifications are included in the enclosed PDF.</p> <p>While considerable progress has been made toward the achievement of practices transforming from 2011 to 2014 recognition and/or toward Advanced Primary Care (APC)</p>   |





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| Milestone Name   | Narrative Text   |
|--|--|
|  | <p>accreditation, due to an aggressive speed and scale timeline commitment, BHNNY will not meet this milestone for March 2017. However, as we have now engaged HANYS PCMH Advisory Services and have meaningful partner commitment, we are very confident that we will meet the milestone in March 2018 as outlined by the DOH defined milestone date. Over the last year, many of our partners had begun efforts to transform their practices from 2011 to 2014 recognition as evidenced in data source, Level 3 PCMH 2014 Certified Providers. In an effort to provide further assistance toward the achievement of recognition for our contracted primary care partners, the Health Care Association of New York State (HANYS) was chosen as the vendor to support BHNNY in its transformation efforts. HANYS is also a technical assistance provider for Advanced Primary Care (APC). This dual designation will further strengthen transformation efforts on behalf of BHNNY. For partners who choose to obtain PCMH recognition, BHNNY has allocated funds to support two distinct trajectories called Tier I and Tier II. In Tier I our contracted partners chose one site that would benefit from one to one transformation support. In Tier II, BHNNY is providing 11 primary care practices an opportunity to participate in group learning collaboratives. The PPS is also providing additional one to one support to identified practice sites that have limited resources which may make it more challenging for them to achieve recognition. In providing this additional support, BHNNY is confident that those practice sites will achieve recognition. The HANYS engagement will include a thorough current state assessment and gap analysis for Tier I participants as well as one on one training sessions, group learning collaboratives, train the trainer approach as well as a robust sustainability plan to ensure the maintenance of PCMH and/or APC. Additionally, the PPS defined metrics as part of our Phase II funds flow distribution that support the PCMH standards must pass elements and critical factors which will assist practices with sustainability efforts once PCMH 2014 is achieved.</p>  |
| <p>Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.</p> | <p>Metric: PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.</p> <p>BHNNY conducted a baseline comprehensive survey in September 2015 in order to understand the current status of data collection within partner EHR systems as well as any patient registries that organizations create on their own or report into from a population health perspective. Beginning in October 2015, BHNNY began collecting patient engagement data from partnering organizations that have a POA and BAA in place. For each of the projects that BHNNY is participating in, patients that received the defined services were reported by secure means in a template registry form. Data is aggregated and de-duplicated on a quarterly basis and reported to DOH for quarterly reporting. Data registry enhancements became a contract deliverable in July of 2016 and each project required additional data elements on a quarterly basis. Project 2aiii is utilizing three patient registries from PPS projects to perform population health management. For organizations participating in the HHARI project, a registry of patients with one NYS HH defined qualifying condition is collected on a monthly basis. It excludes single qualifying conditions such as chronic mental illness or HIV. For participating hospitals, patient registries include a comprehensive patient list of all Medicaid patients who have been seen in the ED three or more times in the last six months.</p> <p>In November 2016, Columbia Memorial Hospital (CMH) began utilizing their high ED utilizer registry to create integrative, non-duplicative services and reduce avoidable ED visits. The hospital partnered with four care management agencies (CMAs). The CMAs rotate on a weekly basis to have staff present at CMH. The in-patient behavioral health unit and in-patient medical social worker refer patients to the CMA staff, prioritizing those on the registry. Each week the four CMAs hold a conference call and assign patients based on need and the CMA specialty or refer the patient to a Health Home. The group plans to expand this project into the ED in 2017.</p> <p>In March 2017 CMH signed MOUs with the four CMAs in their pilot project in March to provide care management services to their patients at risk for qualifying for health homes. CMH used their HHARI registry to refer patients to the CMAs as part of the newly implemented BHNNY Cares care management program for health home at-risk patients.</p> <p>The Asthma Controller Rx report is provided as an example of a partner leveraging their EHR to effect change on asthma. This process is collaboration at one of the PPS partners between a clinician and a data analyst. A weekly report is distributed showing patient seen for an encounter in the past 90 days and all of the instances in which a controller drug was prescribed, quantity, dosage and refill. Additionally this practice runs a daily report to target opportunities to provide new or updated action plans for patients.</p> <p>The BHNNY patient registries and accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure engagement across the projects and participating organizations continues. As BHNNY identifies a secure means to share data, population health registries will also help organizations target patients for project participation. The PPS is planning on implementing both a Care Coordination and analytics platform within the next six months to further enable data aggregation, risk stratification and care coordination services across the PPS.</p> |
| <p>Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.</p>   | <p>BHNNY in its work with Accenture, LLP developed and adopted the Clinical Integration Care Coordination Model. This model was offered in three separate trainings with materials in May and September 2016 and March 2017 to PPS partners. Each practitioner that touches patients assesses for risk and refers appropriately when a patient</p>   |



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|--|---|
|  | <p>would benefit from care coordination intervention through a comprehensive care management plan. Through mitigating risk with a first line intervention like care management, a foundation is created to ultimately support the overall DSRIP goals of decreasing ED utilization and unnecessary readmission. Risk stratification is identified as best practice and is utilized by ED, hospital inpatient units and PCMH. The three hospitals within the PPS, Albany Medical Center Hospital, Columbia Memorial Hospital and Saratoga Hospital utilize the nationally recognized LACE Index Scoring Tool for Risk Assessment of Hospital Readmission. Each ED and inpatient unit utilizes this as a standard part of the medical record. During 3 separate meetings (3/17 CMH, 3/23 AMCH, 3/29 SH) with each hospital, each hospital not only confirmed this but reviewed their own readmission rates with the PMO in comparison to where the PPS is expected to be. Many of our PCMH use modified versions of risk stratification tools developed by American Academy of Family Medicine and the Camden Coalition of Healthcare Providers. As part of a comprehensive community-based care management program, we have facilitated linkages between PCMH and community Care Management Agencies for care coordination care management services. Once risk is identified, the source can either make a referral to a contracted Care Management Agency (CMA) for care coordination or in some cases, the PCMH could choose to work with the low level patient they are able to manage. A process to make a referral for at-risk patients, developed by the PMO was disseminated to partners in a process flow, which took place in a webinar for CMA on 3/23 as well as separate in person meetings with PCMH on three occasions of 3/17 with Columbia Memorial Health Care, 3/22 with Center for Disability Services and 3/23 with Albany Family Medicine. A decision tree flow chart in addition to other materials were disseminated and explained to them to understand the referral process to not only CMAs for HHAR clients but also those who qualify directly for Health Homes. A comprehensive person-centered care plan template was developed through the core components identified in the work with Accenture. These components are consistent with the minimum requirements for a NYS Health Home program. The care plan template was reviewed and approved by the project subcommittee on 3/20/17. Utilizing the approved care plan template, participating CMA have started engaging patients to develop care plans. We are also in the process of evaluating multiple electronic care management system to facilitate a seamless exchange of care plans across many providers. Two PCMH, Albany Family Medicine and Scotia Glenville PCMH have implemented doing the Person Centered Care Plans for low risk patients in the practice.</p> |
| <p>Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.</p> | <p>BHNNY is in the process of developing a comprehensive community-based care management program, BHNNY Cares, to support proactive and episode-based coordination and management of clinical and non-clinical needs of our attributed members. As a first step in this process, we developed and offered agreements to the regional Care Management Agencies (CMA) to provide timely services and establish necessary linkages with participating PCMHs. Four care management agencies including Alliance for Positive Health, Rehabilitation Support Services, Catholic Charities and Mental Health Association of Columbia – Greene Counties chose to sign the contractual agreement. This contract specifically outlines the roles and responsibilities of the CMA. Most importantly, the contract emphasizes the sharing and communication of the care plan with the PCMH to ensure a comprehensive coordination of care.</p> <p>To support and formalize the linkages between CMAs and PCMHs, BHNNY created an MOU template that was presented to and approved by the project subcommittee prior to distribution the partners. The template is accompanied by a policy guidance tool surrounding information sharing. Within the MOU each partner's roles are delineated to what their roles and responsibilities are in concert with the care coordination of the client.</p> <p>By 3/31/17 two MOUs were signed between CMA and PCMH. Our partners at Center for Disability Services (PCMH) signed with Rehabilitation Support Services (CMA) and Columbia Memorial Hospital (PCMH) signed with Alliance for Positive Health. As part of this partnership, during the first week of engagement, Columbia Memorial Hospital identified a group of 6 patients with frequent ED usage and referred them to Alliance for Positive Health, a contracted care management agency.</p> <p>Moving forward, we will continue to link additional PCMHs with one of our contracted agencies</p>   |



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|---|--|
|   | <p>to expand the process across our PPS. PCMHs will continue to identify patients utilizing standard risk-assessment tool and either provide needed service on-site or refer them to an agency for additional support. A process to make a referral for at-risk patients, developed by the PMO was disseminated to partners in a process flow, which took place in a webinar for CMA on 3/23 as well as separate in person meetings with PCMH on three occasions of 3/17 with Columbia Memorial Health Care, 3/22 with Center for Disability Services and 3/23 with Albany Family Medicine.</p>  |
| <p>Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).</p> | <p>Through the work the PPS has done in the HHAR subcommittee, active partners not only have created partnerships amongst each other, but each has access to network resources through such things as the roster and other communications available to them. Formal partnerships from this committee have developed; an example of this is our partner Center for Disability Services, a Patient Centered Medical Home, established an MOU with The Butt Stops Here, to work in collaboration to provide smoking cessation services to patients. Mental Health Association of Columbia-Greene Counties provided us with copies of their MOUs they routinely sign with medical, behavioral health and social service agencies to collaborate and work as partners to provide services to clients who cross many agencies and systems. This is representative of what all agencies do as a common practice. The PMO has funded two programs in which PCPs can access and refer. The Law Enforcement Assisted Diversion Program (LEAD) through Catholic Charities is a PPS funded program that is open for referrals from PCPs and other community partners. This diversion programs purpose is to work collaboratively with community partners and seek treatment for low level offenders and relieve the criminal justice system from flooding with individuals who are in crisis. PCPs can also access three Mobile Crisis Programs throughout the PPS; likewise, mobile crisis will refer patients to PCPs. The PMO recently funded expansion of mobile crisis services for the southern region of the PPS, which will provide further access and collaboration with partners.</p> <p>Metric 2:<br/>Throughout DY1Q4, the AMCH PPS, assisted by the consulting firm Accenture, completed an IT current state assessment. Accenture conducted a thorough analysis within a sample of key partner organizations to outline current network capabilities for data sharing and the interoperability of systems. Utilizing this assessment, work has continued with all partners participating in PPS projects. Meaningful Use Stage 2 readiness and PCMH Level 3 requirements along with Hixny connectivity serve as the basis for Primary Care Provider's EHR configurations.</p> <p>A main priority of the PPS is to create a community-based integrated delivery system that will incorporate all aspects of patient care needs. Integration and clinical data sharing among all members of the patient care team will enable providers to work together to avoid potentially preventable events and improve patient care. Utilizing a MU2 certified system offers the providers system functionality necessary to achieve this integration. MU2 certified systems also enable practices to align and document PCMH requirements. All of the PCP practices participating in project 2.d.iii (Center for Disability Services, Community Care Physicians, Capital Care, Albany Medical Center, Saratoga, and Columbia Memorial) are utilizing MU2 certified EHRs and are exchanging C-CDAs and clinical information with our RHIO Hixny. We have included copies of their EHR certifications in the enclosed PDF.</p> <p>In addition, all contracted safety-net PCPs, Non-PCPs, and Care Management Providers participating in</p> |



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| Milestone Name   | Narrative Text   |
|--|--|
|  | <p>project 2.a.iii have connected and signed QE agreements with Hixny. All Primary Care Providers participating in this project are currently sharing data and subscribe to alerts. In addition, all Care Management providers participating in the Health Home at Risk project have signed Hixny agreements as of 3/30/17.</p>  |
| <p>Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.</p> | <p>M1: PPS has adopted evidence-based guidelines for management of chronic conditions. Chronic condition appropriate evidence-based practice guidelines developed and process implemented.<br/> M2: Regularly scheduled formal meetings are held to develop collaborative evidence-based care practices.<br/> M3: PPS has included social service agencies in the development of risk factor reduction and care practice guidelines.<br/> M4: Culturally competent educational materials have been developed to promote management and prevention of chronic disease.</p> <p>BHNNY began adopting evidence-based guidelines at the sub-committee level in May 2016. The project sub-committees identified evidence-based guidelines relevant to their project and presented them to Clinical and Quality Affairs Committee for approval. An inventory of the guidelines approved to date has been provided as required by Milestone 9 Metric 1.</p> <p>The BHNNY Asthma &amp; Telemedicine Subcommittee created "Asthma in the Primary Care Practice program", accessible on DVD through IPRO and NYSDOH, available for more widespread access and use. The training was shared, virtually, with contracted organizations to provide to their PCPs, and other licensed clinical staff that deliver asthma self-management education to patients.</p> <p>Per IPRO, the training is described as a companion to the NYS Consensus Asthma Guideline decision support tool and pocket guide.</p> <p>In DY2Q2, the Cardiovascular Subcommittee reviewed JNC-8 Guidelines for the Management of Hypertension. The JNC-8 as standards will be used by the PPS to hold itself accountable for planning and implementation of the CVD project. Formal training and implementation of the guidelines has been implemented by several partners in the PPS.</p> <p>BHNNY partner Catholic Charities created the LEAD program: Law Enforcement Assisted Diversion Program. This partner is one of four CMAs with an MOU with BHNNY to provide care coordination to at-risk patients in the PPS as part of BHNNY Cares. The goals of the LEAD program are to:</p> <ul style="list-style-type: none"> <li>• Reduce future criminal behavior related to behavioral health &amp; drug involvement</li> <li>• Improve public safety</li> <li>• Employ risk reduction strategies to reduce harms associated with drug use</li> </ul> <p>At the time of diversion LEAD coordinators complete and assessment considering PCPs, substance abuse and behavioral health treatments and care coordination services. Once assessed, the clients are referred to BHNNY Cares or HH as appropriate for focused care management services.</p> <p>Overview of the LEAD program, presentation, trainings, and attendees are provided as required by Milestone 9, Metric 3.</p> <p>BHNNY staff collaborated with the Cultural Competency Health Literacy Committee (CCHLC) to utilize the National Patient Safety Foundation Ask Me 3 patient education handout and create the ED Usage and Cancer Screening Handouts for patient education. Ask Me 3 is an educational program that encourages patients to ask three specific questions to better understand their diagnosis and how to self-manage conditions. The ED Usage handout is a patient education tool developed to help patients know when to utilize the ED, urgent care, or visit their PCP. The cancer screening handout provides information on when to be screened for cervical, colorectal and breast cancer per the BHNNY approved evidence-based guidelines for these cancers. These documents have been provided as required in Milestone 9, Metric 4.</p> <p>These handouts have been approved by the CCHLC for cultural competence and health literacy as evidenced by approval emails from CCHLC members as required by Milestone 9, Metric 4.</p> |



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**Milestone Review Status**

| <b>Milestone #</b>  | <b>Review Status</b> | <b>IA Formal Comments</b>  |
|---------------------|----------------------|--|
| <b>Milestone #1</b> | Pass & Complete      |  |
| <b>Milestone #2</b> | Fail                 | The PPS did not complete this milestone by the prescribed deadline.    |
| <b>Milestone #3</b> | Fail                 | The PPS did not meet the provider level commitment for this milestone. |
| <b>Milestone #4</b> | Fail                 | The PPS did not complete this milestone by the prescribed deadline.    |
| <b>Milestone #5</b> | Pass & Complete      |  |
| <b>Milestone #6</b> | Pass & Complete      |  |
| <b>Milestone #7</b> | Fail                 | The PPS did not meet the provider level commitment for this milestone. |
| <b>Milestone #8</b> | Fail                 | The PPS did not meet the provider level commitment for this milestone. |
| <b>Milestone #9</b> | Pass & Complete      |  |



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**✔ IPQR Module 2.a.iii.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**IPQR Module 2.a.iii.5 - IA Monitoring**

**Instructions :**



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**Project 2.a.v – Create a medical village/alternative housing using existing nursing home infrastructure**

**✔ IPQR Module 2.a.v.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

|   |
|---|
| <p>Risks</p> <ul style="list-style-type: none"><li>•Lack of capital funding may affect the participating SNFs ability to successfully restructure their current operating model.</li><li>•Lack of engagement by a sufficient number of providers.</li><li>•Staffing and corresponding workers may need retraining to accommodate the transformation of the facility. Workforce limitations associated with salaries and training will be a challenge.</li><li>•Since the AMCH PPS catchment area represents a diverse population, some identified hot spot areas may not align with the needs of this project initiative.</li><li>•The proper waivers to implement this project may not be approved in time to meet the AMCH PPS speed and scale requirements.</li><li>•Updated provider type and safety net designation may be unavailable prior to the submission. This may not represent the provider data accurately which will affect the speed and scale deliverables.</li><li>•Lack of IT infrastructure, EHR utilization, and proper data security protocols within the identified partnering SNFs will impede the success of this project.</li><li>•Completing and submitting an approved Certificate of Need (CON) to the NYSDOH is a timely process that may cause delays in the overall project implementation.</li></ul> <p>Mitigation Strategies</p> <ul style="list-style-type: none"><li>•AMCH PMO will structure funds flow to encourage organizational/provider buy-in as well as timely submission of all required documentation. (CONs) (1a/b/h).</li><li>•DSRIP training and education teams in collaboration with our workforce training vendor (TBD) will provide resources, materials, and training to assist the staff to ensure they are comfortable with the potential shift in roles and responsibilities (1c).</li><li>•AMCH PMO will analyze existing data, as well as identified hot spots in the CNA to determine which partnering facilities may have excess bed capacity and willing to participate in this project (1d).</li><li>•AMCH PMO will review existing waivers and identify ones that are needed to ensure that the proper applications are in place in order to effectively implement 2av (1e).</li><li>•AMCH PMO will work closely with KPMG and PCG to ensure that proper categorization of the providers and organizations attributed to the PPS network will be available and updated on a regular basis (1f).</li><li>•Enhanced EHR capabilities will be important for the success of this project. AMCH PPS will ensure that constant communication and additional data resources will be accessible by all partnering providers engaged in 2av. MAPP Tool functionality, Salient Data and other information provided by the NYSDOH will be imperative (1g).</li></ul> |
|---|





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**✔ IPQR Module 2.a.v.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY3,Q4                 | 680                    |

|              | Year,Quarter             | DY2,Q1 | DY2,Q2 | DY2,Q3 | DY2,Q4 |
|--------------|--------------------------|--------|--------|--------|--------|
| PPS Reported | Baseline Commitment      | 120    | 180    | 220    | 300    |
|              | Quarterly Update         | 0      | 0      | 0      | 0      |
|              | Percent(%) of Commitment | 0.00%  | 0.00%  | 0.00%  | 0.00%  |
| IA Approved  | Quarterly Update         | 0      | 0      | 0      | 0      |
|              | Percent(%) of Commitment | 0.00%  | 0.00%  | 0.00%  | 0.00%  |

**⚠ Warning: PPS Reported - Please note that your patients engaged to date (0) does not meet your committed amount (300) for 'DY2,Q4'**

**Current File Uploads**

| User ID  | File Type | File Name   | File Description                       | Upload Date         |
|----------|-----------|---|--|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ2av_MDL2av2_PES_TRAIN_AMCH_PPS__2_A_V__FINAL_FOR_MAPP_UPLOAD_12208.xlsx | AMCH PPS__2_A_V__FINAL FOR MAPP UPLOAD | 04/25/2017 02:28 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments  |
|---------------|---|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4. |



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**✔ IPQR Module 2.a.v.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Transform outdated (underperforming) nursing home capacity into a stand-alone emergency department/urgent care center or other healthcare-related purpose.  | DY3 Q4              | Project         | N/A           | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Execute project to reduce outdated nursing home capacity into a stand-alone, "medical village"  |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will survey and review all of the existing SNFs and Long Term Care Facilities in our PPS to determine current bed capacity, bed utilization, financial sustainability, and willingness to participate in 2av - with a specific focus on Daughters of Sarah Nursing Home, Albany County Nursing Home, and Saratoga Hospital Nursing Home. |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO will analyze the Community Needs Assessment and other relevant sources to determine current gaps and highest demand (hot spots) for services provided, number of excess nursing home beds by county, current hospitalization/ED utilization rates, and Medicaid patient breakdown.   |                     | Project         |               | Completed   | 03/28/2016          | 06/30/2016        | 03/28/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:3. AMCH PMO will select the SNFs that will be involved in Project 2av based on the data collected and willingness to participate. AMCH PPS will communicate these findings to the PPS Executive Committee of the PAC, PPS Board and PPS Providers.   |                     | Project         |               | Completed   | 07/01/2016          | 12/31/2016        | 07/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |
| <b>Task</b><br>M1:4. AMCH PMO will develop implementation plan with designated SNFs to include beds to be decertified, funding, "Medical Village" implementation/re-use and feasibility within the existing time frames.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will develop and execute contracts with  |                     | Project         |               | In Progress | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| partnering SNFs to establish contract deliverables, funding, timeframes, and additional service coordination needs.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:6. AMCH PMO will execute implementation plan by working with partnering SNFs to complete CONs to decertify beds and re-use freed up space to create either a medical village construct with interdisciplinary care delivery, or alternative housing depending on the details of the scope of services.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #2</b><br>Provide a clear statement of how the infrastructure transformation program will promote better service and outcomes (service volume, occupancy statistics, etc.) for the community based upon the community needs assessment including, evaluation of specific planning needs for any Naturally Occurring Retirement Community (NORC) occurring within the PPS. | DY2 Q4              | Project         | N/A           | Completed | 03/28/2016          | 03/31/2017        | 03/28/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS has completed evaluation of community needs, including planning needs for NORCs, and has developed goals to provide improved access to needed services.   |                     | Project         |               | Completed | 03/28/2016          | 03/31/2017        | 03/28/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will analyze the Community Needs Assessment along with each SNFs current operating model, ED utilization patterns, and associated costs in order to address the need and the potential creation of NORC.<br>C.N.A Data: (pg. 45-46, 181, 183,185)  |                     | Project         |               | Completed | 03/28/2016          | 06/30/2016        | 03/28/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. After evaluating the current state of each SNF, AMCH PMO will determine what services can be provided for each Medical Village/Alternative Housing based on needs, availability and willingness of providers, as well as space availability.  |                     | Project         |               | Completed | 03/28/2016          | 06/30/2016        | 03/28/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:3. Based on the prior steps, AMCH PMO will create and provide an implementation plan to outline an infrastructural transformation program that will promote better service and outcomes for the community.   |                     | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. AMCH PMO will execute implementation plan by working with partnering SNFs to complete infrastructural transformation programs.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will finalization of Medical Village/Alternative   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| housing services will be linked to additional contracts to be executed, as well as a coordinated and integrated delivery system involving ambulatory care providers as necessary and appropriate for each SNF's business model.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Milestone #3</b><br>Provide a clear description of how this re-configured facility will fit into a broader integrated delivery system that is committed to high quality care and willing/able to participate in payment reform.  | DY2 Q4              | Project         | N/A           | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS has developed a clear strategic plan, which includes, at a minimum:<br>- Definition of services to be provided in medical village and justification based on CNA<br>- Plan for transition of nursing home infrastructure to other needed services<br>- Description of process to engage community stakeholders<br>- Description of any required capital improvements and physical location of the medical village<br>- Plan for marketing and promotion of the medical village and consumer education regarding access to medical village services |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will define services to be provided in medical villages based on CNA analysis.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. AMCH PMO will execute the nursing home infrastructure transition plan that includes a detailed definition of needed medical services, as noted in previous milestones.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. AMCH PMO will work in collaboration with the CCAC to document a process for community engagement on the facility transformation process. AMCH PMO will market and promote the medical village and consumer education regarding access to medical village services.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Based on the results of the CRFPs, AMCH PMO will provide a detailed description of any additional required capital improvements. Without capital funding, the feasibility of the project is severely impacted.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #4</b><br>Provide clear documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal  | DY2 Q4              | Project         | N/A           | Completed | 03/31/2017          | 03/31/2017        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| requirements.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Medical village services and housing are compliant with Olmstead Decision and federal requirements.   |                     | Project         |               | Completed | 03/31/2017          | 03/31/2017        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will ensure that all Medical Villages are in compliance with the Omstead Decision and will request documentation supporting their compliance with federal requirements and regulations.  |                     | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO will provide the documentation, referenced above, in the Quarterly Reports submitted to the NYSDOH.  |                     | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #5</b><br>Identify specific community-based services that will be developed in lieu of these beds based upon the community need.  | DY2 Q4              | Project         | N/A           | Completed | 02/15/2016          | 03/31/2017        | 02/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS increases capacity of community-based services as identified in Community Needs Assessment.   |                     | Project         |               | Completed | 02/15/2016          | 03/31/2017        | 02/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Using existing relevant sources (CNA, Surveys, Hot spots), AMCH PMO will determine which health services are in the highest demand for each participating SNF in order to strategically plan what services should be implemented at each location. These may include addiction services, stand-alone urgent care centers, medical villages, and/or other healthcare-related purposes. |                     | Project         |               | Completed | 02/15/2016          | 06/30/2016        | 02/15/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Using existing relevant sources (CNA, Surveys, Hot spots), AMCH PMO will determine which community-based resources, community navigators, and community outreach programs are currently in the highest demand and are feasible to be developed in space available, if capacity exists or could be created, and are financially feasible.  |                     | Project         |               | Completed | 02/15/2016          | 06/30/2016        | 02/15/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:3. AMCH PMO, in collaboration with the Workforce Coordinating Council, will determine staff training and development, redeployment, retention, and recruitment needs based on the selected community-based services.   |                     | Project         |               | Completed | 02/15/2016          | 03/31/2017        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Using the results from previous steps, the WCC will work with individual providers and our workforce development vendor   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| to assess future state staffing needs by site and incorporate them into the workforce roadmap.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Develop and finalize the infrastructure transition plan for each participating SNF that recognizes available capital funding, identified needs, capacity to meet those needs, and the feasibility of funding. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Compile a list of additional community and health services created through the implementation of the infrastructure transition plan and make this list available through the CCAC.                            |                     | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #6</b><br>Use EHRs and other technical platforms to track all patients engaged in the project.  | DY2 Q4              | Project         | N/A           | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will articulate the scope, objectives and requirements of a patient tracking system to support effective population health management across PPS entities.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO will assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. AMCH PMO will implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. AMCH PMO will implement training sessions to educate participating partners on how to utilize the additional technical platforms.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will utilize the population health IT vendor to support the needs of the PPS and individual organizations/practices to track their population groups for population health management needs.         |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. AMCH PMO will generate required reports on the performance of individual and population health interventions  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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Delivery System Reform Incentive Payment Project  
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**Albany Medical Center Hospital (PPS ID:1)**

| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type   | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| implemented by the practice teams.  |                     |                 |   |             |                     |                   |            |            |                  |                                  |
| <b>Milestone #7</b><br>Ensure that all eligible participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.   | DY3 Q4              | Project         | N/A   | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>All eligible practices meet NCQA 2014 Level 3 PCMH and/or APCM standards.  |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM by DY 3.  |                     | Project         |   | In Progress | 10/19/2015          | 03/31/2018        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQA Level 3 PCMH recognition or APCM.  |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices, relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current certifications. |                     | Project         |   | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4. Perform a practice-specific gap analysis to determine the needed financial, technical and operational support needed to assure successful recognition by DY3.  |                     | Project         |   | In Progress | 07/01/2016          | 03/31/2018        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.  |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows, and other changes, to become NCQA 2014 Level 3 certified or APCM.  |                     | Project         |   | In Progress | 12/07/2015          | 03/31/2018        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:7. Assign specific roles and responsibilities for the participating practice leadership, as well as timelines to implement the action plan effectively to achieve the recognition   |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|-----------------|---|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| by DY 3.   |                     |                 |   |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:8. Monitor progress on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.   |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Track site-specific certification to assure all participating safety-net providers become NCQA 2014 Level 3 PCMH certified or APCM.   |                     | Project         |   | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #8</b><br>Ensure that all safety net providers participating in medical villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.  | DY3 Q4              | Project         | N/A   | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP)     | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Practitioner - Non-Primary Care Provider (PCP) | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Mental Health                                  | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Nursing Home                                   | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee. |                     | Project         |   | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.   |                     | Project         |   | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Work with participating providers, not currently using  |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |





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|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| EHRs, to incentivize EHR adoption for patient care management.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers. |                     | Project         |               | Completed   | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Utilizing the IT-TOM pilot experience, design the PPS-wide future state connectivity model.   |                     | Project         |               | Completed   | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.   |                     | Project         |               | In Progress | 02/12/2016          | 03/31/2018        | 02/12/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.   |                     | Project         |               | In Progress | 10/01/2015          | 03/31/2018        | 10/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #9</b><br>Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2  | DY3 Q4              | Project         | N/A           | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).  |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.  |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Develop a practice-specific action plan to implement necessary changes to workflows and documentation to improve performance on achieving the MU Stage 2 requirements.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Ensure clinician and staff training on new processes is conducted.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Create a contingency plan for organizations that are at risk  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|-----------------|---------------|--------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
| of not achieving Meaningful Use Stage 2 for all utilized systems. Included in this plan will be additional strategies to assist organizations toward completing these requirement. |                     |                 |               |        |                     |                   |            |          |                  |                                  |

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                   | File Name   | Description  | Upload Date         |
|---|---------|-----------------------------|---|--|---------------------|
| Provide a clear statement of how the infrastructure transformation program will promote better service and outcomes (service volume, occupancy statistics, etc.) for the community based upon the community needs assessment including, evaluation of specific planning needs for any Naturally Occurring Retirement Community (NORC) occurring within the PPS. | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_OTH_2av_Milestone_2_remediation_final_15490.docx  | 2av Milestone 2 remediation final  | 06/19/2017 03:52 PM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_OTH_West_Hill_NORC_13583.pdf  | West Hill NORC   | 04/27/2017 09:48 AM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_OTH_RE_DSRIP_Project_2.a.v_(Medical_Village)_-_Milestone_#2_13582.pdf                   | RE_ DSRIP Project 2.a.v (Medical Village) - Milestone #2                 | 04/27/2017 09:48 AM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_OTH_NYS_Ofc_for_the_Aging_-_NORC_13581.pdf  | NYS Ofc for the Aging - NORC   | 04/27/2017 09:47 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_DOC_BHNNY_-_Medical_Village_Transformation_DSRIP_Project_Deliverable_20160602_13579.pdf | BHNNY- Medical Village Transformation DSRIP Project Deliverable_20160602 | 04/27/2017 09:46 AM |
|   | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_MM_BHNNY_2av_strategy_approval_13578.pdf  | BHNNY 2av strategy approval  | 04/27/2017 09:45 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_DOC_BHNNY_2av_Implementation_Plan_Strategy_13577.pdf                                    | BHNNY 2av Implementation Plan Strategy                                   | 04/27/2017 09:44 AM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES2_OTH_2av_SNF_Assessment_Survey_Aggregated_Results_13575.xlsx                             | 2av SNF Assessment Survey_Aggregated Results                             | 04/27/2017 09:42 AM |
| Provide a clear description of how this re-configured facility will fit into a broader integrated delivery system that is committed to high quality care and willing/able to participate in payment reform.   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_OTH_2av_IP-Strategy_Workgroup_rev_20170620_15790.pdf                                    | 2av IP-Strategy_Workgroup rev_20170620                                   | 06/20/2017 11:44 AM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_OTH_2av_Milestone_3_v1_15789.docx   | BHNNY Remediation Narrative 2av Milestone 3                              | 06/20/2017 11:43 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_DOC_BHNNY_2av_SNF_Assessment_Survey_Aggregated_Results_13595.xlsx                       | BHNNY 2av SNF Assessment Survey_Aggregated Results                       | 04/27/2017 09:58 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_DOC_BHNNY_2av_strategy_approval_13593.pdf   | BHNNY 2av strategy approval  | 04/27/2017 09:57 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_DOC_BHNNY_2av_Implementation_Plan_Strategy_13586.pdf                                    | BHNNY 2av Implementation Plan Strategy                                   | 04/27/2017 09:54 AM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                   | File Name   | Description   | Upload Date         |
|---|---------|-----------------------------|---|---|---------------------|
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES3_DOC_BHNNY_-_Medical_Village_Transformation_DSRIP_Project_Deliverable_20160602_13585.pdf | BHNNY - Medical Village Transformation DSRIP Project Deliverable_20160602 | 04/27/2017 09:53 AM |
| Provide clear documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal requirements. | mcintyc | Contracts and Agreements    | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_CONTR_DePaul_Housing_message_15324.pdf  | DePaul Housing message  | 06/19/2017 11:37 AM |
|   | mcintyc | Contracts and Agreements    | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_CONTR_New_York_StateWide_Senior_Action_Council_Contract_Documents_15323.pdf             | New York StateWide Senior Action Council Contract Documents               | 06/19/2017 11:37 AM |
|   | mcintyc | Other                       | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_OTH_2av_Milestone_4_remediation_15322.docx  | 2av Milestone 4 remediation   | 06/19/2017 11:37 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_DOC_Hudson_Park_Olmstead_041217_HHS-690_01-10-17_13626.pdf                              | Hudson Park_Olmstead_041217 HHS-690_01-10-17                              | 04/27/2017 10:18 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_DOC_Coarc_Olmstead_Compliance_Certification_13623.pdf                                   | Coarc Olmstead Compliance Certification                                   | 04/27/2017 10:18 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_DOC_BHNNY_-_Medical_Village_Transformation_DSRIP_Project_Deliverable_20160602_13620.pdf | BHNNY - Medical Village Transformation DSRIP Project Deliverable_20160602 | 04/27/2017 10:17 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES4_DOC_2av_SNF_Assessment_Survey_Aggregated_Results_13617.xlsx                             | 2av SNF Assessment Survey_Aggregated Results                              | 04/27/2017 10:17 AM |
| Identify specific community-based services that will be developed in lieu of these beds based upon the community need.                    | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_NORC_MedVillage_Meeting_Minutes_20170104_13653.doc                            | BHNNY NORC_MedVillage Meeting Minutes 20170104                            | 04/27/2017 10:28 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_2av_SNF-CBO_MS5_13651.pdf   | BHNNY 2av SNF-CBO MS5   | 04/27/2017 10:27 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_2av_SNF_Assessment_Survey_Aggregated_Results_13649.xlsx                       | BHNNY 2av SNF Assessment Survey_Aggregated Results                        | 04/27/2017 10:27 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_2av_strategy_approval_13648.pdf   | BHNNY 2av strategy approval   | 04/27/2017 10:25 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_2av_Implementation_Plan_Strategy_13641.pdf                                    | BHNNY 2av Implementation Plan Strategy                                    | 04/27/2017 10:23 AM |
|   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ2av_MDL2av3_PRES5_DOC_BHNNY_-_Medical_Village_Transformation_DSRIP_Project_Deliverable_20160602_13630.pdf | BHNNY - Medical Village Transformation DSRIP Project Deliverable_20160602 | 04/27/2017 10:20 AM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type | File Name   | Description                | Upload Date         |
|--|---------|-----------|---|----------------------------|---------------------|
| Use EHRs and other technical platforms to track all patients engaged in the project. | mcintyc | Templates | 1_DY2Q4_PROJ2av_MDL2av3_PRES6_TEMPL_BHN<br>NY_2av_patient_registry_13659.xlsx | BHNNY 2av patient registry | 04/27/2017 10:32 AM |

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text  |
|---|---|
| Transform outdated (underperforming) nursing home capacity into a stand-alone emergency department/urgent care center or other healthcare-related purpose.  |   |
| Provide a clear statement of how the infrastructure transformation program will promote better service and outcomes (service volume, occupancy statistics, etc.) for the community based upon the community needs assessment including, evaluation of specific planning needs for any Naturally Occurring Retirement Community (NORC) occurring within the PPS. | <p>Upon receiving responses from the SNF-specific Survey, four SNFs in our PPS were identified as potential players in the Medical Village Project. Based solely on the survey responses and other public resources such as NYSDOH Nursing Home Profiles, the BHNNY PMO was able to evaluate the current state of each SNF. Subsequently, recommendations for potential services for each plausible Medical Village/Alternative Housing were based upon these responses. The methodology stemmed from linking each SNF to hotspot neighborhoods closest in proximity. Once paired, it was evident what services in the local EDs were being utilized the most. The prevalence of specific medical conditions within that specific population provided a baseline understanding of what services would be beneficial to add or to continue within the SNFs.</p> <p>A synopsis of the SNF Survey Capstone Study can be found starting on page 14 of the Project 2.a.v Medical Village Implementation Strategy – the strategy document was approved electronically by the BHNNY Board on April 26, 2017.</p> <p>The Naturally Occurring Retirement Communities (NORC) definition provided by the Independent Assessor for the successful completion of this milestone is outdated. Across the country there is no standard definition for considering a building as a NORC. Some specify that a certain proportion of residents are over the age of 55-60. The Office of the Aging NORC definition has been modified for more recent funding opportunities and lowered the percentages of older residents (30-40%). The Office of the Aging definition will result in almost no areas within BHNNY's catchment area having a NORC. A separate description from the Office of the Aging (see "NYS Ofc for the Aging – NORC" document) suggests that there are two types of NORCs:</p> <ol style="list-style-type: none"> <li>1) A multiunit housing development or complex (for example, apartment building, condominium complex, mobile home park); and</li> <li>2) A defined geographic area (for example, neighborhood, community, town, city).</li> </ol> <p>The latter Office of the Aging definition also references the expansion of NORC services and programs.</p> <p>In an effort to gain information relevant to the creation of NORCs, the project team met with Gail Myers, Deputy Director of the NY Statewide Senior Action Council. Ms. Myers has extensive knowledge relating to the regulations and requirements NORCs must adhere to, advocates regularly for the patient population within these NORCs, and has connections and prior experience with the NORCs in the Capital Region as well as a direct tie to the West Hill Project.</p> <p>This project (see "West Hill NORC" document) does not meet the definition of a Neighborhood NORC as it is built on Village Model of Aging in Place, but it could in the future based on expansion of borders. The only official NORC in the BHNNY region is organized through Jewish Family Services along the Whitehall Road corridor, which is not a hot spot.</p> <p>The BHNNY 2.a.v Medical Village Implementation Strategy discusses the community needs assessment on pages 4 to 13, and addresses how local NORCs, within the limited scope provided by DOH, will contribute to improved service and outcomes for the PPS on pages 32 to 35.</p> <p>The project team and Marcus Harazin of NY StateWide Senior Action Council co-facilitated a meeting on January 4, 2017 with about 9 local senior service organizations to focus on NORCs and what it meant to the implementation of this project (see the "NORC_MedVillage Meeting Minutes 20170104"). The Medical Village/Alternative Housing Workgroup officially formed in January 2017 to include representation from organizations interested in participating in the Medical Village Project, advocates for the aging population, CBOs in the area that can provide their expertise as well as their knowledge of NORCs.</p> |
| Provide a clear description of how this re-configured facility will fit into a broader integrated delivery system that is committed to high quality care  | The AMCH PMO collaborated with Clarkson University Graduate Students over a ten-week period to analyze the community needs assessment (CNA) to define services for potential Medical Villages / Alternative Housing (BHNNY – Medical Village Transformation DSRIP Project Deliverable_20160602). However, given that the parameters   |



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**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text   |
|--|--|
| <p>and willing/able to participate in payment reform.</p>  | <p>surrounding this initiative were constrained to just the four SNFs who responded to the initial SNF Survey (BHNNY 2av SNF Assessment Survey_Aggregated Results; pg 29 of BHNNY 2.a.v Medical Village Implementation Strategy), this task was pushed back to encourage further engagement with other SNFs in the AMCH PPS network. No additional SNFs responded.</p> <p>The formation of the Medical Village/Alternative Housing Workgroup, which includes representation from SNFs, Village &amp; Neighborhood NORCs, and senior/disabled service and advocacy organizations, has enabled a forum to develop linkages needed to transform the traditional nursing home model of care. The CNA will be a resource for the Workgroup as organizational relationships form to deliver the services pertinent to the specific patient population within the network (Medicaid Inpatient Admission &amp; ED Visit Opportunity Gaps; charts on pgs 12- 13 of BHNNY 2.a.v Medical Village Implementation Strategy).</p> <p>Through the survey and workgroup discussion, it has been determined that local SNFs have no plans to decertify bed as there is limited capacity, however, there may be an opportunity to utilize available space in the nursing home setting. To realize the objectives of this project, the PPS will rely on partner collaborations such as the Saratoga Hospital model.</p> <p>Saratoga Hospital previously had 64 SNF beds and 8 STR beds between two units. The hospital freed up 36 beds in 2010 via attrition, and converted the unit to a 20 bed acute care orthopedics unit. In 2016, in alignment with the SNF project initiative, the hospital closed the remaining 36 beds to create another 20 bed acute care unit. The additional private rooms permit the hospital to move patients through the continuum of care more efficiently with fewer holds in the ED.</p> <p>In addition to decertifying SNF beds within the hospital care setting, Saratoga Hospital has partnered with The Wesley Community, which includes a continuous care retirement center (Wesley Health Care Center) and Wesley's nursing home. Saratoga Hospital has a primary care practice in the Wesley Health Care Center serving patients from Wesley and the surrounding area.</p> <p>Wesley's medical staff and hospitalists of Saratoga Hospital are working diligently to reduce unnecessary admissions from the nursing home. Actions taken include case review of each hospital admission, training staff nurses at Wesley to start IVs, providing suture kits to the physicians at Wesley, implementing a plan for use of incentive spirometry by all new admissions to the Wesley site, and coordinating meetings between Wesley physicians and SH hospitalists, and Wesley physicians and the TSH palliative care team. The resulting outcomes have been favorable. Between 11.1.16 and 1.31.17, an average of 19 residents per month were sent to Saratoga Hospital from Wesley nursing home. Following the aforementioned actions, only 4 residents were seen in the SH ED in February for an improvement of 21%. Saratoga Hospital will be rolling out this program to other local Saratoga nursing homes. The 2av project team plans to collaborate with SH in an effort to pilot this program in other counties in an effort to reduce avoidable rehospitalizations. (see pgs 25-28 BHNNY 2.a.v Medical Village Implementation Strategy).</p> <p>BHNNY added Wesley Health Care Center to the PPS network during open enrollment in March 2017.</p> <p>The BHNNY 2.a.v Medical Village Implementation Strategy was approved electronically by the BHNNY Board on 4.26.2017.</p> |
| <p>Provide clear documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal requirements.</p> | <p>There is no need for alternative housing at this time. Through the survey and the workgroup discussion, it has been determined that the local SNFs have no plans to decertify beds as there is limited capacity (see columns M, N, and Q of the "2av SNF Assessment Survey_Aggregated Results" document and page 13 of the "BHNNY – Medical Village Transformation DSRIP Project Deliverable_20160602" document). However, there may be an opportunity to utilize available space in the nursing home setting. To realize the objectives of this project, the PPS will need to rely on partner collaborations such as the Saratoga Hospital model.</p> <p>If alternative housing is pursued, the required documentation will be provided to show evidence of compliance with the Olmstead Requirements.</p>   |
| <p>Identify specific community-based services that will be developed in lieu of these beds based upon the community need.</p>                    | <p>The AMCH PMO in collaboration with the Clarkson University Graduate Students worked over a ten week long period to review, comprehend and analyze in great detail the community needs assessment and other relevant data sources – Census Data, SPARCS data, etc. – as a means towards working to define which health services are in the highest demand for each SNF who responded to the SNF Survey (see "BHNNY – Medical Village Transformation DSRIP Project Deliverable_20160602" document). Of the four SNFs who responded to the initial SNF Survey - Daughters of Sarah Nursing Center, Inc., The Pines at Glens Falls Center for Nursing and Rehabilitation, Riverside Center for Rehabilitation and Nursing, and the Saratoga Hospital Nursing Home – a thorough and comprehensive review of the current services offered to the residents compared to the growing community needs (see "BHNNY 2av SNF Assessment Survey_Aggregated Results" document and page 29 of the "BHNNY 2.a.v Medical Village Implementation Strategy" document) – the Clarkson Students were able to identify where the gaps in care exist, and better yet – recommendations for what services need to be included in the continuum of care to rectify this. A recommendation for each SNF was provided to the Project Management Office and reviewed by the Executive Team.</p>   |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text   |
|---|--|
|   | <p>From the information related to the current baseline services offered at each SNF, in comparison to the projected community needs of the surrounding hotspot neighborhoods – further analysis was done as it relates to the community-based resources and community outreach programs that are located in close proximity to each of the designated areas. Recommended potential linkages and working relationships between various CBOs in the neighborhoods was provided to the Project Management Office, as well as information relating to how important community navigators will be for the success of care coordination relative to the DSRIP initiative. The recommended service lines for each Medical Village paired with the recommended Community Based Organizations in the area are very much aligned and in sync with one another. (see pages 30 to 32 of the "BHNNY 2av Implementation Plan Strategy" document and the "BHNNY 2av SNF-CBO MS5" document). Although the CBOs identified in the strategy document were highlighted because they are located within a hot spot, the PPS has partnered with numerous organizations that are not necessarily based in the hot spot areas, but serve the target population.</p> <p>The Medical Village/Alternative Housing Workgroup is an essential resource to ensure the service gaps within the community are met as several CBOs are represented in the workgroup. The project team will also utilize the Consumer and Community Affairs Committee (CCAC) as a resource.</p> <p>The "BHNNY 2.a.v Medical Village Implementation Strategy" document was approved electronically by the BHNNY Board on April 26, 2017.</p>  |
| <p>Use EHRs and other technical platforms to track all patients engaged in the project.</p>   | <p>BHNNY conducted a survey in September 2015 to understand the current status of data collection within partner EHR systems, as well as any patient registries that organizations create on their own or report into from a population health perspective. In October 2015 BHNNY began collecting patient engagement data from partnering organizations with a POA and BAA in place on a quarterly basis. For each of the projects that BHNNY is participating in, patients that received the defined services were reported by secure means via Movelt to a single point of contact in the AMCH PMO. Data includes patient first name, last name, Medicaid/CIN, date of service, and NPI or organization reporting. Data registry enhancements became a contract deliverable in July of 2016 and each project required additional data elements on a monthly basis. Each patient registry contains Medicaid patient's first name, last name, CIN, Date of Service, NPI, and additional defining elements depending on the project.</p> <p>The project registry is a list of patients sent to the Emergency Department from the participating nursing home. This registry is meant to be a utilization registry to identify frequent visits from a participating nursing home to the ED.</p> <p>The patient registries, along with patient engagement data, will be stored securely within the BHNNY PMO following the BHNNY Data Security and Confidentiality Plan protocol and utilized at an aggregate level as a means to help identify target areas of improvement. BHNNY patient registries and the accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure that engagement across the projects and participating organizations continues. As BHNNY identifies a secure means to share data, population health registries will also help organizations target patients for project participation. The EHR subcommittee, project subcommittees, the Technology and Data Management Committee, as well as other appropriate stakeholders will play a collaborative and active role in creating and updating additional registries as necessary.</p> |
| <p>Ensure that all eligible participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.</p>   |  |
| <p>Ensure that all safety net providers participating in medical villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.</p> |  |
| <p>Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2</p>   |  |



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**Milestone Review Status**

| <b>Milestone #</b>  | <b>Review Status</b> | <b>IA Formal Comments</b> |
|---------------------|----------------------|---------------------------|
| <b>Milestone #1</b> | Pass & Ongoing       |                           |
| <b>Milestone #2</b> | Pass & Complete      |                           |
| <b>Milestone #3</b> | Pass & Complete      |                           |
| <b>Milestone #4</b> | Pass & Complete      |                           |
| <b>Milestone #5</b> | Pass & Complete      |                           |
| <b>Milestone #6</b> | Pass & Complete      |                           |
| <b>Milestone #7</b> | Pass & Ongoing       |                           |
| <b>Milestone #8</b> | Pass & Ongoing       |                           |
| <b>Milestone #9</b> | Pass & Ongoing       |                           |



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**✔ IPQR Module 2.a.v.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |





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**IPQR Module 2.a.v.5 - IA Monitoring**

**Instructions :**



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**Project 2.b.iii – ED care triage for at-risk populations**

**✔ IPQR Module 2.b.iii.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

The primary risk for 2.b.iii relates to practitioner engagement. Currently most healthcare practitioners and health systems function as silos due to the current fee-for-service payment system. Without their active participation in our efforts to redesign the delivery of care management services system-wide, we will face substantial hurdles in implementing the steps necessary to achieve this project's milestones. Strong linkages to Level 3 PCMH primary care sites are essential to the success of this project. The inability of primary care practices to achieve this recognition will create additional challenges. Currently, there is a barrier to integration of physical and behavioral health care services which compromises the care of individuals with mental health and chemical dependency disorders and chronic medical conditions. To mitigate this risk, we will:

- The CQAC in collaboration with the PMO will create teams, led by practicing clinician stakeholders, to develop clear lines of accountability and communication between relevant groups, and the development of clinical pathways using evidence-based standards of care and monitoring of clinical performance.
- With a dedicated team of experts, AMCH PMO will coach and support other primary care practitioners through the process of obtaining recognition as a Level 3 PCMH.
- Provide training and encourage a cultural shift across organizational boundaries to create a more collaborative, patient-centered approach whereby primary care practitioners are more attentive to behavioral health disorders.
- Assist our partners with the transition towards value based payments and away from traditional payment models.

A second risk to the successful implementation of this project is the reliance on IT infrastructure that is needed to support communication and data sharing between practitioners and organizations. The IT and data sharing survey conducted in November 2014 revealed that the partners within our PPS are at differing levels of IT capabilities and are on differing platforms, creating risks to integration. The current lack of infrastructure and capital and operating funding to support telemedicine, interoperability, real time connectivity, alerts and secure messaging limits successful implementation. Existing IT infrastructure is inadequate to support a region-wide interoperable system, and a comprehensive patient registry. Rolling out new tools for data sharing while trying to establish new lines of communication to coordinate care will be a complex challenge. To mitigate this risk, we will:

- Involve practitioners from our participating partners in the redesign and implementation of clinical IT and data sharing systems.
- Integrate a member of the AMCH Technology and Data Management Committee into the team to develop our clinical integration strategy.□



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**✔ IPQR Module 2.b.iii.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY2,Q4                 | 3,534                  |

|              | Year,Quarter             | DY2,Q1  | DY2,Q2  | DY2,Q3  | DY2,Q4  |
|--------------|--------------------------|---------|---------|---------|---------|
| PPS Reported | Baseline Commitment      | 1,313   | 1,768   | 2,652   | 3,534   |
|              | Quarterly Update         | 6,011   | 7,060   | 7,060   | 8,829   |
|              | Percent(%) of Commitment | 457.81% | 399.32% | 266.21% | 249.83% |
| IA Approved  | Quarterly Update         | 0       | 2,410   | 0       | 1,966   |
|              | Percent(%) of Commitment | 0.00%   | 136.31% | 0.00%   | 55.63%  |

**Current File Uploads**

| User ID  | File Type | File Name  | File Description                       | Upload Date         |
|----------|-----------|--|--|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ2biii_MDL2biii2_PES_TRAIN_AMCH_PPS__2_B_III_FINAL_FOR_MAPP_UPLOAD_13955.xlsx | AMCH PPS_3_D_III FINAL FOR MAPP UPLOAD | 04/27/2017 03:43 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments  |
|---------------|---|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4. |



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**✅ IPQR Module 2.b.iii.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Establish ED care triage program for at-risk populations  | DY2 Q2              | Project         | N/A           | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Stand up program based on project requirements  |                     | Project         |               | Completed | 09/01/2015          | 09/30/2016        | 09/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Identify participating provider and/or sites, including Health Home providers, PCPs, Dentists, EDs, CBOs, Social Service agencies and care coordination providers.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Confirm participation of AMCH ED, Malta ED, Saratoga ED, and Columbia-Memorial ED as key stakeholders in this project.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Establish ED care triage sub-committee with representation based on identified providers.   |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4. Identify at-risk population and hotspots across the 5 county service area by analyzing member claims or other data to determine ED utilization patterns and share baseline metrics with project teams.  |                     | Project         |               | Completed | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Complete a project specific current state assessment of the participating providers' ED care triage programs.   |                     | Project         |               | Completed | 10/12/2015          | 03/31/2016        | 10/12/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:6. Working with WCC, assess current care coordinator/patient navigator staffing patterns in participating EDs.   |                     | Project         |               | Completed | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:7. Define future state for the ED Care Triage program utilizing hot spotting and current state assessment. Evaluate viability of models of care for implementation: EMTALA screening/ Urgent Care diversion model, and care coordination/ patient navigator and medical home linkages. |                     | Project         |               | Completed | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:8. ED care triage sub-committee will develop a draft action  |                     | Project         |               | Completed | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |



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| <b>Project Requirements<br/>(Milestone/Task Name)</b>  | <b>Prescribed<br/>Due Date</b> | <b>Reporting<br/>Level</b> | <b>Provider Type</b> | <b>Status</b> | <b>Original<br/>Start Date</b> | <b>Original<br/>End Date</b> | <b>Start Date</b> | <b>End Date</b> | <b>Quarter<br/>End Date</b> | <b>DSRIP<br/>Reporting Year<br/>and Quarter</b> |
|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| plan to implement steps necessary to achieve the identified future state ED care triage program across all participating EDs.  |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Task</b><br>M1:9. ED care triage sub-committee will select evidence-based guidelines for the prescription of narcotics and the appropriate use of I-STOP program in EDs.                                |                                | Project                    |                      | Completed     | 10/12/2015                     | 03/31/2016                   | 10/12/2015        | 03/31/2016      | 03/31/2016                  | DY1 Q4  |
| <b>Task</b><br>M1:10. Submit draft ED care triage action plan including guidelines for the use of narcotics to the CQAC for review and approval.   |                                | Project                    |                      | Completed     | 04/01/2016                     | 06/30/2016                   | 04/01/2016        | 06/30/2016      | 06/30/2016                  | DY2 Q1  |
| <b>Task</b><br>M1:11. Submit ED care triage plan to the PPS Board for review and approval.   |                                | Project                    |                      | Completed     | 09/01/2016                     | 09/30/2016                   | 09/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:12. Assess existing workflows, referral patterns, access to primary care services and HIT capabilities for each participating ED site.   |                                | Project                    |                      | Completed     | 10/19/2015                     | 03/31/2016                   | 10/19/2015        | 03/31/2016      | 03/31/2016                  | DY1 Q4  |
| <b>Task</b><br>M1:13. Complete gap analysis between the current state assessment and defined future state at the participating ED sites.   |                                | Project                    |                      | Completed     | 04/01/2016                     | 06/30/2016                   | 04/01/2016        | 06/30/2016      | 06/30/2016                  | DY2 Q1  |
| <b>Task</b><br>M1:14. Utilizing gap analysis and future state model, identify change activities and begin plan implementation utilizing the PDSA methodology.  |                                | Project                    |                      | Completed     | 09/01/2016                     | 09/30/2016                   | 09/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:15. Identify future state care coordination/patient navigator staffing models in participating EDs and create a staffing plan including job descriptions and training requirements.      |                                | Project                    |                      | Completed     | 01/04/2016                     | 06/30/2016                   | 01/04/2016        | 06/30/2016      | 06/30/2016                  | DY2 Q1  |
| <b>Task</b><br>M1:16. Assist ED sites with staff recruitment, training and ongoing competency assessment.  |                                | Project                    |                      | Completed     | 09/01/2016                     | 09/30/2016                   | 09/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:17. Working with neighboring PPSs, AMCH TDMC and HIXNY, evaluate the feasibility of developing and implementing a system to exchange patient information electronically among local EDs. |                                | Project                    |                      | Completed     | 07/01/2016                     | 09/30/2016                   | 07/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:18. Implement processes across PPS to connect patients with non-emergency needs to receive an appointment to see a primary care provider with whom they can establish a relationship.    |                                | Project                    |                      | Completed     | 07/01/2016                     | 09/30/2016                   | 07/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type   | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:19. Working with CCHLC, develop culturally competent patient education materials on the appropriate use of ED services and benefits of primary care services offered at a PCMH.  |                     | Project         |   | Completed   | 06/15/2016          | 09/30/2016        | 06/15/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:20. Provide training for ED providers and staff in how to talk to patients about where they should receive care for non-emergent needs.  |                     | Project         |   | Completed   | 09/01/2016          | 09/30/2016        | 09/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:21. Provide training for ED providers regarding the implementation of guidelines for prescription of narcotic use.   |                     | Project         |   | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:22. Identify process metrics as well as data collection methods to facilitate evaluation reporting and implementation.   |                     | Project         |   | Completed   | 09/01/2016          | 09/30/2016        | 09/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:23. Designate ED staff to review evaluation reports regarding ED utilization and to take appropriate action to assure adherence to project objectives.   |                     | Project         |   | Completed   | 09/01/2016          | 09/30/2016        | 09/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #2</b><br>Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.<br>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.<br>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.<br>c. Ensure real time notification to a Health Home care manager as applicable | DY2 Q2              | Project         | N/A   | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>All eligible practices meet NCQA 2014 Level 3 PCMH and/or APCM standards.   |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria.)  |                     | Project         |   | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Encounter Notification Service (ENS) is installed in all PCP offices and EDs  |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP) | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Providers Associated with Completion:**



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type              | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|----------------------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Assevero Anna-Maria D Md; Baldini Gleda P Md; Brown Sheryl; Clark Catherine Nielsen; Ditursi Mary Kathleen Williams; Harde Has Mukh C Md; Hechanova Arnel B Md; James Philip C Md; Kelleher Ruth Ellen; Mack Brigid; O'Brien Joanne Elizabeth; Owen Claudina; Paeglow Robert John Md; Ray David Allan Md; Sacco Joseph P Md; Sgarlata Donna L; Signor Connie J; Stetzer Lee; Tomiak Henry P Jr Md; Young Linda |                     |                 |                            |             |                     |                   |            |            |                  |                                  |
| Task<br>Encounter Notification Service (ENS) is installed in all PCP offices and EDs   |                     | Provider        | <u>Safety Net Hospital</u> | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |                            |             |                     |                   |            |            |                  |                                  |
| Albany Medical Ctr Hospital; Columbia Memorial Hospital  |                     |                 |                            |             |                     |                   |            |            |                  |                                  |
| Task<br>M1:1. Establish a project sub-committee with representation from participating primary care practitioners, to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM by DY3.  |                     | Project         |                            | Completed   | 10/19/2015          | 09/30/2016        | 10/19/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| Task<br>M1:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQA Level 3 PCMH recognition or APCM.  |                     | Project         |                            | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| Task<br>M1:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home, as well as current certifications.   |                     | Project         |                            | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| Task<br>M1:4. Perform a practice-specific gap analysis to determine the financial, technical and operational support needed to assure successful recognition by DY3.   |                     | Project         |                            | In Progress | 07/01/2016          | 03/31/2018        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| Task<br>M1:5. Based on the gap analysis, establish priorities and develop a practice-specific action plan to achieve the recognition and transform the care delivery model.  |                     | Project         |                            | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| Task<br>M1:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA Level 3 certified or APCM.   |                     | Project         |                            | In Progress | 12/07/2015          | 03/31/2018        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| Task<br>M1:7 Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY 3.  |                     | Project         |                            | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| Task<br>M1:8. Facilitate partnerships between participating EDs and  |                     | Project         |                            | In Progress | 09/01/2016          | 03/31/2018        | 09/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| community primary care providers including PCMHs to develop open-access models to assure timely access.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:9. The ED care triage sub-committee will draft process and procedures to assure timely access and effective communication for care transitions between the ED and community primary care practices. |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:10. CQAC will review and approve the draft procedures.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:11. Designate staff at participating community sites to serve as contacts for ED care coordinators/patient navigators for access and care coordination needs.                                       |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:12. Provide training to ED and practice staff on the new protocols to assure adherence.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:13. ED care coordinator/patient navigator will assure timely notification to the patient's Health Home care manager as applicable.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:14. Monitor on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Develop a practice-specific action plan to implement necessary changes to workflows and documentation to improve performance on achieving the MU Stage 2 requirements.                           |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:3. Ensure clinician and staff training on new processes is conducted.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:4. Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:1. Conduct an analysis of current state PCPs and EDs ability to utilize secure messaging systems and alerts internally and  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |





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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| externally.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M3:2. Define future state in terms of PPS-wide ENS utilization and technical parameters.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:3. AMCH PMO, in consultation with the TDMC, will identify and contract with a vendor for PPS-wide secure messaging and alerts through ADT feeds.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Ensure installation of ENS service in PCP offices and EDs as necessary and appropriate.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #3</b><br>For patients presenting with minor illnesses who do not have a primary care provider:<br>a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.<br>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.<br>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care provider). | DY2 Q2              | Project         | N/A           | Completed | 01/04/2016          | 09/30/2016        | 01/04/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>A defined process for triage of patients from patient navigators to non-emergency PCP and needed community support resources is in place.  |                     | Project         |               | Completed | 01/04/2016          | 09/30/2016        | 01/04/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. ED care triage sub-committee will develop criteria for effective, timely and efficient management of patients presenting to ED with minor illnesses.   |                     | Project         |               | Completed | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Identify and select nationally recognized best practice evidenced-based processes of ED care triage for patients presenting without PCPs.  |                     | Project         |               | Completed | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:3. Establish policies and procedures to assure timely referral from ED clinical staff to patient navigators for effective linkages to PCP.  |                     | Project         |               | Completed | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:4. Assess current state of staffing and systems in place to   |                     | Project         |               | Completed | 01/04/2016          | 03/31/2016        | 01/04/2016 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |



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|--|---------------------|-----------------|---------------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| support effective patient navigation.  |                     |                 |                     |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Define desired state of utilizing the patient navigators and community referrals to assist patients who do not have a primary care provider with timely access to community primary care.   |                     | Project         |                     | Completed | 03/01/2016          | 06/30/2016        | 03/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:6. Submit identified ED patient navigator processes to the CQAC for review and approval.   |                     | Project         |                     | Completed | 06/22/2016          | 06/30/2016        | 06/22/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:7. Submit identified ED patient navigator processes to the PPS Board for final approval.   |                     | Project         |                     | Completed | 06/17/2016          | 06/30/2016        | 06/17/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:8. Assess future staffing resources needed to support timely access to patient navigators and primary care providers.  |                     | Project         |                     | Completed | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:9. Working in collaboration with WCC, develop additional trainings to providers and staff on the role of patient navigators in ED.   |                     | Project         |                     | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:10. Assist participating providers in creating and developing processes and protocols to transition from identified current state to the ideal future state that enables referrals of patients by patient navigators to non-emergency based PCP's, CBOs and other community based supports as appropriate. |                     | Project         |                     | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:11. Conduct educational programs to participating sites and providers.   |                     | Project         |                     | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:12. Identify project participating non-emergency PCPs, CBOs and any other community support resources.   |                     | Project         |                     | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:13. Assess current state of access to primary care at identified PCMH sites and other CBOs for referrals from EDs.   |                     | Project         |                     | Completed | 01/04/2016          | 09/30/2016        | 01/04/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #4</b><br>Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)                             | DY2 Q2              | Project         | N/A                 | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>PPS has protocols and operations in place to transport non-acute  |                     | Provider        | Safety Net Hospital | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| patients to appropriate care site. (Optional).   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Milestone #5</b><br>Use EHRs and other technical platforms to track all patients engaged in the project.  | DY2 Q2              | Project         | N/A           | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Articulate the scope, objectives and requirements of a patient tracking system to support effective population health management across PPS entities.                                   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Implement training sessions to educate participating partners on how to utilize the additional technical platforms.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Utilize the population health IT vendor to support the needs of the PPS and individual organizations/practices to track their population groups for population health management needs. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found



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**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text |
|--|----------------|
| Establish ED care triage program for at-risk populations   |                |
| Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.<br>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.<br>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.<br>c. Ensure real time notification to a Health Home care manager as applicable  |                |
| For patients presenting with minor illnesses who do not have a primary care provider:<br>a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.<br>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.<br>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care provider). |                |
| Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)  |                |
| Use EHRs and other technical platforms to track all patients engaged in the project.   |                |

**Milestone Review Status**

| Milestone #         | Review Status                    | IA Formal Comments   |
|---------------------|----------------------------------|--|
| <b>Milestone #1</b> | Pass & Complete                  |  |
| <b>Milestone #2</b> | Fail                             | The PPS did not complete this milestone by the prescribed deadline.    |
| <b>Milestone #3</b> | Pass & Complete                  |  |
| <b>Milestone #4</b> | Pass (with Exception) & Complete | This is an optional milestone and not required for project completion. |
| <b>Milestone #5</b> | Pass & Complete                  |  |



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**✓ IPQR Module 2.b.iii.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**IPQR Module 2.b.iii.5 - IA Monitoring**

**Instructions :**



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**Project 2.d.i – Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care**

**✓ IPQR Module 2.d.i.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

The 2.d.i project will face at least four challenges during implementation. The most significant risks focus on: 1) lack of community/patient engagement, 2) relevant real-time claims data 3) shortage of Patient Activation Measure (PAM) trained staff and 4) secure IT data sharing and communication.

Lack of patient engagement will make it difficult for individuals to take an active role in planning their own care. A lack of patient engagement may be due to language barriers, understanding medical conditions, cultural differences, age, gender, sexual orientation and socioeconomic status. This leads to disparities in care and disparate outcomes. Individuals who are not engaged in care may be harder to identify because there are no relevant claims data, or medical records that provide linkages to connect and engage them. In order to effectively track patient activation levels of the LU, NU and UI, relevant real time claims data is a necessity. A third risk when implementing 2.d.i, is a shortage of trained staff to conduct the PAM. The data captured by the PAM will be used for tracking and reporting in order to assist CBO's and others as they engage their clients. Providing training over the five-county area will be an intensive undertaking for the PMO. Another risk we face is this project's reliance on IT Infrastructure which is needed to support communication data collection and reporting. Many CBOs lack IT infrastructure including secure messaging, data storage, interoperability, and RHIO connectivity. This poses a risk in their abilities to manage data, and meet project deliverables.

However, with the aforementioned challenges, and others which are unforeseen, the PMO has established a plan for risk mitigation. To mitigate these risks, the PMO will:

- Collaborate with CBO partners to encourage patient engagement, participation, and use their leverage to community resources to reconnect beneficiaries to designated PCPs through the use of Patient Navigators and Community Navigators.
- Collaborate with CBO partners to identify hot spots for outreach and health navigation activities in key communities especially in underserved locations.
- Strategically place trained navigators at hot spots and ensure they have appropriate resources and materials to facilitate education related to health insurance coverage, age-appropriate primary and preventive healthcare services and resources.
- Collaborate with peer educators and other stakeholders, including consumers, to identify ways to build trust among target populations.
- Work with impacted sites and organizations to assist with training and technical support needed to ensure data is collected, entered and reported correctly.
- Utilize claims data to help identify hot spot areas of the LU, NU, and UI populations.
- Partner with MCOs to discuss data sharing and best practices for reconnecting beneficiaries to designated PCPs.
- Establish a PPS-wide team and train them in PAM. Utilization of the Train-the-Trainer method will allow for representatives from partnering organizations deliver the training and increase the number of PAM Trainers PPS-wide.
- Provide training to all necessary staff in cultural competency, health literacy, data documentation and reporting.
- Assist participating partners with IT infrastructure issues by pursuing step-wise strategies including manual data collection thru RHIO connectivity.



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Encourage alternative cost effective approaches to data integrity and security access across the PPS network.





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**✔ IPQR Module 2.d.i.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY3,Q4                 | 22,667                 |

|              | Year,Quarter             | DY2,Q1 | DY2,Q2 | DY2,Q3 | DY2,Q4 |
|--------------|--------------------------|--------|--------|--------|--------|
| PPS Reported | Baseline Commitment      | 15,300 | 15,946 | 17,365 | 18,837 |
|              | Quarterly Update         | 10,319 | 13,849 | 13,849 | 16,413 |
|              | Percent(%) of Commitment | 67.44% | 86.85% | 79.75% | 87.13% |
| IA Approved  | Quarterly Update         | 0      | 9,014  | 0      | 5,157  |
|              | Percent(%) of Commitment | 0.00%  | 56.53% | 0.00%  | 27.38% |

**⚠ Warning: PPS Reported - Please note that your patients engaged to date (16,413) does not meet your committed amount (18,837) for 'DY2,Q4'**

**Current File Uploads**

| User ID  | File Type | File Name  | File Description                                   | Upload Date         |
|----------|-----------|--|--|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ2di_MDL2di2_PES_TRAIN_AMCH_PPS__2_D_I_FINAL_FOR_MAPP_UPLOAD_PAM_Data_v1_12206.xlsx | AMCH PPS _2_D_I_ FINAL FOR MAPP UPLOAD PAM Data v1 | 04/25/2017 02:22 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments  |
|---------------|---|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4. |



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DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**✅ IPQR Module 2.d.i.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Contract or partner with community-based organizations (CBOs) to engage target populations using PAM(R) and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate. | DY3 Q4              | Project         | N/A           | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Partnerships with CBOs to assist in patient "hot-spotting" and engagement efforts as evidenced by MOUs, contracts, letters of agreement or other partnership documentation.   |                     | Project         |               | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with the CCAC, will engage key CBOs to assist with targeting populations to administer the Patient Activation Measure (PAM) and other potential patient activation techniques.                                   |                     | Project         |               | Completed   | 07/16/2015          | 12/31/2015        | 07/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO, in collaboration with the CCAC, will develop partnership agreements with key CBOs to administer the PAM tool in hot-spot areas.   |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Identify safety-net providers that will establish agreements with CBOs to expand the reach of the PAM tool to appropriate hot-spot areas.   |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #2</b><br>Establish a PPS-wide training team, comprised of members with training in PAM(R) and expertise in patient activation and engagement.  | DY2 Q4              | Project         | N/A           | Completed   | 06/26/2015          | 03/31/2017        | 06/26/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Patient Activation Measure(R) (PAM(R)) training team established.   |                     | Project         |               | Completed   | 06/26/2015          | 03/31/2017        | 06/26/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will identify key CBOs and providers with resources available to participate in PAM training.  |                     | Project         |               | Completed   | 06/26/2015          | 12/31/2015        | 06/26/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO, in collaboration with neighboring PPSs, will  |                     | Project         |               | Completed   | 07/16/2015          | 07/16/2015        | 07/16/2015 | 07/16/2015 | 09/30/2015       | DY1 Q2                           |



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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| provide a "Train the Trainer" PAM technique workshop to appropriate PMO staff, as well as participating CBOs and healthcare providers.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Roll out "Train the Trainer" method across the five-county region, utilizing trained CBO and provider resources to administer training to staff in their organizations and or across their region.                             |                     | Project         |               | Completed | 08/15/2015          | 03/31/2017        | 08/15/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Annual network capacity assessments will be conducted by the PMO to determine whether there are an appropriate numbers of trainers in each of the five counties to achieve engagement.   |                     | Project         |               | Completed | 03/15/2016          | 03/31/2017        | 03/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:5. Annual competency assessments will be completed by the PMO to determine training skills of the PAM trainers.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #3</b><br>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.  | DY2 Q4              | Project         | N/A           | Completed | 08/25/2015          | 03/31/2017        | 08/25/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Analysis to identify "hot spot" areas completed and CBOs performing outreach engaged.  |                     | Project         |               | Completed | 08/25/2015          | 03/31/2017        | 08/25/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will utilize the CNA and other data sources to identify "hot spot" areas of UI, NU, and LU and present them in map form.  |                     | Project         |               | Completed | 08/25/2015          | 12/31/2015        | 08/25/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO will utilize CBOs to assist in identifying UI, NU, and LU patient hot spot areas based on their knowledge of the communities they serve. Hot spot areas will be submitted to the CCAC for review and recommendations. |                     | Project         |               | Completed | 08/25/2015          | 12/31/2015        | 08/25/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. AMCH PMO will develop contracts or partnership agreements with key CBOs to perform outreach within the identified "hot spot" areas to engage UI, NU, and LU.   |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #4</b><br>Survey the targeted population about healthcare needs in the PPS' region.  | DY2 Q4              | Project         | N/A           | Completed | 07/06/2015          | 03/31/2017        | 07/06/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Community engagement forums and other information-gathering mechanisms established and performed.  |                     | Project         |               | Completed | 07/06/2015          | 03/31/2017        | 07/06/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with the CCAC, will establish a community engagement plan. This plan will outline community events, forums, and other information-gathering mechanisms.   |                     | Project         |               | Completed   | 07/06/2015          | 12/31/2015        | 07/06/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO, in collaboration with the CCAC, will administer a population specific survey or other information gathering mechanisms, to identify healthcare needs. This survey will be conducted via participating providers or local community forums. |                     | Project         |               | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. AMCH PMO will participate or host community forums and community engagement events at least semi-annually.   |                     | Project         |               | Completed   | 12/07/2015          | 03/31/2017        | 12/07/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #5</b><br>Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.   | DY3 Q4              | Project         | N/A           | In Progress | 06/26/2015          | 03/31/2018        | 06/26/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>PPS Providers (located in "hot spot" areas) trained in patient activation techniques by "PAM(R) trainers".   |                     | Project         |               | In Progress | 06/26/2015          | 03/31/2018        | 06/26/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO, with assistance from CCHLC, will identify participating providers with resources available to participate in PAM, shared decision making, cultural competency, and health literacy training.   |                     | Project         |               | In Progress | 06/26/2015          | 03/31/2018        | 06/26/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO, in collaboration with neighboring PPSs, will provide a "Train the Trainer" PAM workshop to appropriate PMO staff and healthcare providers.   |                     | Project         |               | Completed   | 07/16/2015          | 12/31/2015        | 07/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Deploy trainers across the five-county region, utilizing staff to administer necessary and appropriate training to providers in their organizations.   |                     | Project         |               | In Progress | 01/11/2016          | 03/31/2018        | 01/11/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:4. Generate lists of all providers trained on the following: PAM, shared decision making, cultural competency and health literacy. Conduct, at least annually, competency based assessments of knowledge, skills, and abilities.                        |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #6</b><br>Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect   | DY2 Q4              | Project         | N/A           | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| beneficiaries to his/her designated PCP (see outcome measurements in #10).<br><ul style="list-style-type: none"> <li>This patient activation project should not be used as a mechanism to inappropriately move members to different health plans and PCPs, but rather, shall focus on establishing connectivity to resources already available to the member.</li> <li>Work with respective MCOs and PCPs to ensure proactive outreach to beneficiaries. Sufficient information must be provided regarding insurance coverage, language resources, and availability of primary and preventive care services. The state must review and approve any educational materials, which must comply with state marketing guidelines and federal regulations as outlined in 42 CFR §438.104.</li> </ul> |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Procedures and protocols established to allow the PPS to work with the member's MCO and assigned PCP to help reconnect that beneficiary to his/her designated PCP.  |                     | Project         |               | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. After the opt-out process has been completed, the AMCH PMO will establish BAAs with appropriate MCOs that will allow the PPS to share lists of PCPs assigned to NU and LU enrollees from MCOs.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO will reach out to participating PCPs and provide patient lists for verification, potential outreach and engagement efforts.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Revised lists will be shared with MCOs and PCPs to accurately present patients who belong to the PCP for activation purposes.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. AMCH PMO will engage appropriate CBOs who will use their leverage and knowledge of the communities they serve to help reconnect beneficiaries to designated PCPs.   |                     | Project         |               | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will work with PPS partners to establish appropriate care coordination/patient navigation activities to assist CBOs and enable patients to become more engaged in care.  |                     | Project         |               | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #7</b>  | DY3 Q4              | Project         | N/A           | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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| Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM(R) 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.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>For each PAM(R) activation level, baseline and set intervals toward improvement determined at the beginning of each performance period (defined by the state).  |                     | Project         |               | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with the three overlapping PPSs in the region, will provide a "Train-the-Trainer" PAM workshop.  |                     | Project         |               | Completed   | 07/16/2015          | 12/31/2015        | 07/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Per the method developed by the state, the AMCH PMO will establish baseline cohort data of PAM activation levels.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:3. AMCH PMO will utilize data from PAM to develop strategies for patient engagement and re-engagement, utilizing participating CBOs and providers. These strategies will include designated intervals for reassessment, and will facilitate the tracking of improvement for each cohort.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:4. Data will be shared, at an aggregate level, across the PPS via dashboards and other means to facilitate tracking of patient activation score improvement.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #8</b><br>Include beneficiaries in development team to promote preventive care.   | DY2 Q4              | Project         | N/A           | Completed   | 03/02/2016          | 03/31/2017        | 03/02/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Beneficiaries are utilized as a resource in program development and awareness efforts of preventive care services.  |                     | Project         |               | Completed   | 03/02/2016          | 03/31/2017        | 03/02/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will identify eligible beneficiaries to participate in consumer interviews, focus groups, community forums, work groups, committees, and/or engagement activities to ensure sufficient input from consumers in the design of preventive care services across the PPS. These activities will be done in collaboration with the CCAC and the CQAC. Consumer feedback will be used across the PPS to make necessary modifications and other changes to the project implementation plan. |                     | Project         |               | Completed   | 03/02/2016          | 03/31/2017        | 03/02/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| <b>Milestone #9</b><br>Measure PAM(R) components, including: <ul style="list-style-type: none"> <li>• Screen patient status (UI, NU and LU) and collect contact information when he/she visits the PPS designated facility or "hot spot" area for health service.</li> <li>• If the beneficiary is UI, does not have a registered PCP, or is attributed to a PCP in the PPS' network, assess patient using PAM(R) survey and designate a PAM(R) score.</li> <li>• Individual member's score must be averaged to calculate a baseline measure for that year's cohort.</li> <li>• The cohort must be followed for the entirety of the DSRIP program.</li> <li>• On an annual basis, assess individual members' and each cohort's level of engagement, with the goal of moving beneficiaries to a higher level of activation.</li> <li>• If the beneficiary is deemed to be LU &amp; NU but has a designated PCP who is not part of the PPS' network, counsel the beneficiary on better utilizing his/her existing healthcare benefits, while also encouraging the beneficiary to reconnect with his/her designated PCP.</li> <li>• The PPS will NOT be responsible for assessing the patient via PAM(R) survey.</li> <li>• PPS will be responsible for providing the most current contact information to the beneficiary's MCO for outreach purposes.</li> <li>• Provide member engagement lists to relevant insurance companies (for NU &amp; LU populations) on a monthly basis, as well as to DOH on a quarterly basis.</li> </ul> | DY3 Q4              | Project         | N/A           | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Performance measurement reports established, including but not limited to: <ul style="list-style-type: none"> <li>- Number of patients screened, by engagement level</li> <li>- Number of clinicians trained in PAM(R) survey implementation</li> <li>- Number of patient: PCP bridges established</li> <li>- Number of patients identified, linked by MCOs to which they are associated</li> <li>- Member engagement lists to relevant insurance companies (for NU &amp; LU populations) on a monthly basis</li> <li>- Member engagement lists to DOH (for NU &amp; LU populations) on a monthly basis</li> </ul>   |                     | Project         |               | In Progress | 07/16/2015          | 03/31/2018        | 07/16/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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| - Annual report assessing individual member and the overall cohort's level of engagement   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with overlapping PPSs, will provide a "Train-the-Trainer" PAM workshop.  |                     | Project         |               | Completed   | 07/16/2015          | 12/31/2015        | 07/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. AMCH PMO will utilize performance measurement reports to determine the number of patients screened by engagement level. Patient status will be collected and, if UI, NU, or LU, assess and score the patient using PAM.   |                     | Project         |               | In Progress | 01/25/2016          | 03/31/2018        | 01/25/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:3. AMCH PMO will establish benchmarks based on annually calculated assessment scores averaged for the cohort. The cohorts will be followed for the entirety of the DSRIP program.  |                     | Project         |               | In Progress | 04/15/2016          | 03/31/2018        | 04/15/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:4. AMCH PMO will assess individual members' level of engagement with the goal of moving individual members to a higher activation level.   |                     | Project         |               | In Progress | 01/13/2016          | 03/31/2018        | 01/13/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:5. AMCH PMO will provide contact information to appropriate MCOs related to beneficiaries who complete a PAM evaluation. The AMCH PMO will provide engagement lists for NU and LU to the MCOs on a monthly basis. This information will be provided to the DOH on a quarterly basis. |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. AMCH PMO will utilize performance measures to provide annual reports assessing individual members and the overall cohort's level of engagement.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #10</b><br>Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.   | DY3 Q4              | Project         | N/A           | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Volume of non-emergent visits for UI, NU, and LU populations increased.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will evaluate ED utilization for NU, LU, and UI population attributed to the provider network.   |                     | Project         |               | In Progress | 06/06/2016          | 03/31/2018        | 06/06/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO will work with designated patient navigators, care coordinators, and CBOs to educate targeted patients about alternatives to ED usage.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |





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| <b>Task</b><br>M1:3. AMCH PMO will track UI, NU, and LU targeted populations to longitudinally assess alternative healthcare system use over the life of the DSRIP project.  |                     | Project         |                  | In Progress | 06/06/2016          | 03/31/2018        | 06/06/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:4. Reports will be generated regarding utilization of non-emergent services in comparison to baseline data for the target population annually.   |                     | Project         |                  | In Progress | 06/06/2016          | 03/31/2018        | 06/06/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #11</b><br>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.   | DY3 Q4              | Project         | N/A              | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Community navigators identified and contracted.   |                     | Provider        | PAM(R) Providers | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Community navigators trained in connectivity to healthcare coverage and community healthcare resources, (including primary and preventive services), as well as patient education.  |                     | Provider        | PAM(R) Providers | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will work with CBOs and other participating providers to identify and develop a team of community navigators to be trained in their region. These community navigators will have ties to their communities and basic knowledge of community resources.                                       |                     | Project         |                  | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO will execute participation agreements with CBOs to develop a group of community navigators as identified in metric 1, step 1.  |                     | Project         |                  | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:1. AMCH PMO, in collaboration with the WCC and workforce training vendor, will select community navigator training materials specific to linkages for healthcare and community healthcare resources. This training will be implemented, evaluated, and provided to appropriate staff on an annual basis. |                     | Project         |                  | In Progress | 05/02/2016          | 03/31/2018        | 05/02/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #12</b><br>Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.  | DY2 Q4              | Project         | N/A              | Completed   | 01/25/2016          | 03/31/2017        | 01/25/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Policies and procedures for customer service complaints and appeals developed.  |                     | Project         |                  | Completed   | 01/25/2016          | 03/31/2017        | 01/25/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type           | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|-------------------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:1. AMCH PMO will develop patient complaint and grievance policies, which will be reviewed and approved by the PAC prior to network-wide implementation. Drafts of these policies and procedures will also be reviewed by consumer focus groups facilitated by the CCAC.  |                     | Project         |                         | Completed   | 01/25/2016          | 03/31/2017        | 01/25/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. The approved policies will be posted to the website, as well as presented at community forums, to clarify steps in the process and educate both patients and the community at large in terms of how to submit and what to expect.   |                     | Project         |                         | Completed   | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #13</b><br>Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM(R).  | DY2 Q4              | Project         | N/A                     | Completed   | 07/16/2015          | 03/31/2017        | 07/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>List of community navigators formally trained in the PAM(R).  |                     | Provider        | <u>PAM(R) Providers</u> | Completed   | 07/16/2015          | 03/31/2017        | 07/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |                         |             |                     |                   |            |            |                  |                                  |
| Abigail R Watson   |                     |                 |                         |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. AMCH PMO will work with PPS partners to identify representatives in each hub who will serve as community navigators and be trained in PAM.  |                     | Project         |                         | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. AMCH PMO, in collaboration with Insignia and approved Train-the-Trainers, will utilize the PAM tool and conduct training to assist community navigators in patient activation and education. A list of all navigators formally trained in PAM will be maintained by the PMO and will be available upon request. |                     | Project         |                         | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #14</b><br>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 resources.                    | DY3 Q4              | Project         | N/A                     | In Progress | 12/05/2015          | 03/31/2018        | 12/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Community navigators prominently placed (with high visibility) at appropriate locations within identified "hot spot" areas.   |                     | Provider        | PAM(R) Providers        | In Progress | 12/05/2015          | 03/31/2018        | 12/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will utilize the CNA to identify "hot spot" areas  |                     | Project         |                         | In Progress | 03/15/2016          | 03/31/2018        | 03/15/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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|---|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| to assign navigators, as well as to identify various community events, health fairs, and high utilization EDs. 6  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Based on the identification of hot-spots, community events, and fairs, AMCH PMO will direct contracted CBOs to place navigators at these facilities and events to provide education to eligible individuals regarding the availability of health insurance coverage.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. AMCH PMO will provide culturally appropriate materials to community navigators to assist in a standardized approach to educate eligible individuals, and link them to insurance as appropriate. The CBOs and navigators will provide reports on the number of individuals engaged and referred.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #15</b><br>Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.   | DY3 Q4              | Project         | N/A           | In Progress | 05/02/2016          | 03/31/2018        | 05/02/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Navigators educated about insurance options and healthcare resources available to populations in this project.   |                     | Project         |               | In Progress | 05/02/2016          | 03/31/2018        | 05/02/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO, in collaboration with the WCC and workforce training vendor, will select community navigator training materials specific to insurance options and health resources available. This training will be implemented, evaluated, and provided to appropriate staff on an annual basis. In addition, AMCH PMO will provide culturally appropriate materials to the community navigators to assist in a standardized approach to educate eligible individuals, and link them to insurance as appropriate. |                     | Project         |               | In Progress | 05/02/2016          | 03/31/2018        | 05/02/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #16</b><br>Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.  | DY3 Q4              | Project         | N/A           | In Progress | 10/01/2016          | 03/31/2018        | 10/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Timely access for navigator when connecting members to services.   |                     | Project         |               | In Progress | 10/01/2016          | 03/31/2018        | 10/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. AMCH PMO will work with participating providers to develop policies and procedures to ensure appropriate and timely access for navigators connecting patients to services.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b>   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:2. Based on the approved policies and procedures, navigators will be connected to appropriate staff at service locations to obtain primary and preventative care services for community members.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Contractual agreements will include evaluation criteria that allow for navigator feedback and specific reporting requirements to enable the PMO to determine adequacy of staffing, training needs, caseload ratios, and related items as identified for this project. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #17</b><br>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.  | DY2 Q4              | Project         | N/A           | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.   |                     | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Articulate the scope, objectives and requirements of a patient tracking system to support an effective patient registry and population health management across PPS entities.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems and patient registries.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of patients in registries as appropriate.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Implement training sessions to educate participating partners on how to utilize the registries and population health platforms.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Utilize the population health IT vendor to support the needs of the PPS and individual organizations/practices to track their registered patients.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Following quality improvement protocols, such as PDSA, evaluate clinical outcomes of patients in the registries and adjust  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Project Requirements (Milestone/Task Name)                       | Prescribed Due Date | Reporting Level | Provider Type | Status | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|--------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
| clinical protocols and work flows as needed to improve outcomes. |                     |                 |               |        |                     |                   |            |          |                  |                                  |

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                         | File Name  | Description   | Upload Date         |
|---|---------|-----------------------------------|--|---|---------------------|
| Establish a PPS-wide training team, comprised of members with training in PAM(R) and expertise in patient activation and engagement.  | mcintyc | Training Documentation            | 1_DY2Q4_PROJ2di_MDL2di3_PRES2_TRAIN_BHNNY_2di_Training_documentation_11765.pdf                           | BHNNY 2di Training documentation                            | 04/24/2017 02:56 PM |
|   | mcintyc | Templates                         | 1_DY2Q4_PROJ2di_MDL2di3_PRES2_TEMPL_AMCH_PPS_2di_PAM_Trainers_and_Coaches-KP_11261.xlsx                  | BHNNY 2di PAM Trainers and Coaches                          | 04/21/2017 12:15 PM |
| 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.   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES3_OTH_Remediation_2di_Project_JUN16_Milestone_3_15777.docx                   | Remediation 2di Project JUN16 Milestone 3                   | 06/20/2017 11:26 AM |
|   | mcintyc | Templates                         | 1_DY2Q4_PROJ2di_MDL2di3_PRES3_TEMPL_2di_PAM_Zip_Code_Data_MAR17_11262.xlsx                               | BHNNY 2di zipcode data                                      | 04/21/2017 12:18 PM |
| Survey the targeted population about healthcare needs in the PPS' region.   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_Listening_Sessions_SUMMARY_JUN16_11271.pdf                              | BHNNY Listening Session Summary                             | 04/21/2017 12:35 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_Listening_Sessions_FAQ_11270.pdf  | Listening Sessions FAQ                                      | 04/21/2017 12:29 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_DY2-Q2-SummerFall_Listening_Sessions_Calendar_11269.pdf                 | DY2-Q2-SummerFall Listening Sessions Calendar               | 04/21/2017 12:28 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_DY2-Q1-April_Listening_Sessions_Calendar_11268.pdf                      | DY2-Q1-April Listening Sessions Calendar                    | 04/21/2017 12:28 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_Greene_County-_beneficiaries_advisory_meetings_03222017_11267.docx      | Greene County- beneficiaries advisory meetings 03222017     | 04/21/2017 12:25 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES4_MM_Camino_Nuevo_Listening_Session_Packet_11266.pdf                         | camino Nuevo listening sessions                             | 04/21/2017 12:24 PM |
| 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).<br>• This patient activation project should not be used as a mechanism to inappropriately move members to different health plans and PCPs, but rather, shall focus on establishing connectivity to resources already available to the member.<br>• Work with respective MCOs and PCPs to ensure | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_OTH_2di_Milestone_6_Remediation_Narrative_15779.pdf                        | 2di Milestone 6 Remediation Narrative                       | 06/20/2017 11:28 AM |
|   | mcintyc | EHR/HIE Reports and Documentation | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_EHR_BHNNY_2di_M6_remediation_15778.pdf                                     | BHNNY 2di M6 remediation                                    | 06/20/2017 11:27 AM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_MM_BHNNY-MCO_3.28.17_(2)_14061.docx  | BHNNY-MCO 3.28.17   | 04/28/2017 08:20 AM |
|   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_OTH_RE__Reconnecting_Low_and_Non-Utilizing_Patients_to_their_PCP_14060.pdf | RE_Reconnecting Low and Non-Utilizing Patients to their PCP | 04/28/2017 08:17 AM |
|   | mcintyc | Documentation/Certification       | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_DOC_Beneficiary_Reengagement_Attestation_14059.pdf                         | Beneficiary_Reengagement_Attestation                        | 04/28/2017 08:15 AM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type                         | File Name   | Description   | Upload Date         |
|---|---------|-----------------------------------|---|---|---------------------|
| proactive outreach to beneficiaries. Sufficient information must be provided regarding insurance coverage, language resources, and availability of primary and preventive care services. The state must review and approve any educational materials, which must comply with state marketing guidelines and federal regulations as outlined in 42 CFR §438.104. | mcintyc | Policies/Procedures               | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_P&P_BHNNY_Care_Plan_Final_20170321_14058.pdf                          | BHNNY Care Plan_Final_20170321                          | 04/28/2017 08:13 AM |
|   | mcintyc | Documentation/Certification       | 1_DY2Q4_PROJ2di_MDL2di3_PRES6_DOC_HH_CMA_Workflow_Highlighted_14057.pdf                             | HH CMA Workflow_Highlighted                             | 04/28/2017 08:12 AM |
| Include beneficiaries in development team to promote preventive care.   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES8_OTH_BHNNY_Preventative_Care_CLS_11768.pdf                             | BHNNY Preventative Care CLS                             | 04/24/2017 03:00 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES8_MM_Greene_County-_beneficiaries_advisory_meetings_03222017_11767.docx | Greene County- beneficiaries advisory meetings 03222017 | 04/24/2017 02:59 PM |
|   | mcintyc | Meeting Materials                 | 1_DY2Q4_PROJ2di_MDL2di3_PRES8_MM_Camino_Nuevo_Listening_Session_Packet_11766.pdf                    | Camino Nuevo Listening Session Packet                   | 04/24/2017 02:59 PM |
| Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES12_OTH_Remediation_2di_Project_JUN16_Milestone_12_15781.docx            | Remediation 2di Project JUN16 Milestone 12              | 06/20/2017 11:30 AM |
|   | mcintyc | Policies/Procedures               | 1_DY2Q4_PROJ2di_MDL2di3_PRES12_P&P_BHNNY_client_Grievance_Policy_updated_06.2017_15780.pdf          | BHNNY client Grievance Policy updated 06.2017           | 06/20/2017 11:29 AM |
|   | mcintyc | Policies/Procedures               | 1_DY2Q4_PROJ2di_MDL2di3_PRES12_P&P_BHNNY_client_grievance_policy_11275.pdf                          | BHNNY client grievance policy                           | 04/21/2017 12:46 PM |
| Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM(R).   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES13_OTH_Remediation_2di_Project_JUN16_Milestone_13_15782.docx            | Remediation 2di Project JUN16 Milestone 13              | 06/20/2017 11:31 AM |
|   | mcintyc | Other                             | 1_DY2Q4_PROJ2di_MDL2di3_PRES13_OTH_AMCH_PPS_2_d_i_Project_Summary_June2016_11774.docx               | AMCH PPS 2 d i Project Summary June2016                 | 04/24/2017 03:05 PM |
|   | mcintyc | Training Documentation            | 1_DY2Q4_PROJ2di_MDL2di3_PRES13_TRAIN_BHNNY_2di_Training_documentation_11773.pdf                     | BHNNY 2di Training documentation                        | 04/24/2017 03:04 PM |
|   | mcintyc | Training Documentation            | 1_DY2Q4_PROJ2di_MDL2di3_PRES13_TRAIN_AMCH_PPS_2di_PAM_Trainers_and_Coaches-KP_11771.xlsx            | AMCH PPS 2di PAM Trainers and Coaches                   | 04/24/2017 03:03 PM |
| 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.   | mcintyc | EHR/HIE Reports and Documentation | 1_DY2Q4_PROJ2di_MDL2di3_PRES17_EHR_Remediation_2di_Project_JUN16_Milestone_17_15784.docx            | Remediation 2di Project JUN16 Milestone 17              | 06/20/2017 11:34 AM |
|   | mcintyc | Templates                         | 1_DY2Q4_PROJ2di_MDL2di3_PRES17_TEMPL_2di_patient_engagement_template_11277.xlsx                     | 2di Patient Engagement Template                         | 04/21/2017 12:59 PM |
|   | mcintyc | Templates                         | 1_DY2Q4_PROJ2di_MDL2di3_PRES17_TEMPL_Uninsured_and_Self-Pay_Patient_Registry_11276.xlsx             | Uninsured and Self-Pay Patient Registry                 | 04/21/2017 12:56 PM |



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**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text  |
|--|---|
| <p>Contract or partner with community-based organizations (CBOs) to engage target populations using PAM(R) and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.</p> |   |
| <p>Establish a PPS-wide training team, comprised of members with training in PAM(R) and expertise in patient activation and engagement.</p>  | <p>On July 16, 2015, BHNNY PMO, in collaboration with neighboring PPSs, provided a "Train the Trainer" PAM @ workshop. The workshop was facilitated by Insignia at Saratoga Hospital in Saratoga Springs, NY. There were a total of 19 BHNNY Partners in attendance. Attendees included; BHNNY PMO staff, participating CBO staff and healthcare providers. Since that initial workshop, the PPS has rolled out the "Train the Trainer" method across its five-county region, utilizing trained CBO and provider resources to administer training to staff members in their organizations and/or across their region. As of 03/31/2017, BHNNY has provided PAM @ and Coaching for Activation (CFA) training to over 30 organizations, most of which are categorized as CBOs who actively engage community members, especially the Medicaid population. CBOs that have been trained include – Alliance for Positive Health, Black Nurses Coalition, Catholic Charities, Community Caregivers, Healthy Capital District Initiative, Columbia County Community Healthcare Consortium, Inc., Independent Living Center of the Hudson Valley, Inc., Mental Health Empowerment Project, Northern Rivers, Planned Parenthood Mohawk Hudson, Planned Parenthood Upper Hudson, Shelters of Saratoga, St. Catherine's Center for Children, and Trinity Alliance. The PPS is comprised of over 300 PAM @ trained individuals. A total of 22,933 PAMs@, as of 03/31/2017, were conducted, demonstrating the impact CBOs have when it comes to their ability to properly engage and resonate with the Medicaid Population.</p>   |
| <p>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.</p>   | <p>As of 03/31/2017, BHNNY has provided PAM @ and Coaching for Activation (CFA) training to a total of 30 organizations, most of which are categorized as CBOs – Alliance for Positive Health, Black Nurses Coalition, Catholic Charities, Community Caregivers, Healthy Capital District Initiative, Columbia County Community Healthcare Consortium, Inc., Independent Living Center of the Hudson Valley, Inc., Mental Health Empowerment Project, Northern Rivers, Planned Parenthood Mohawk Hudson, Shelters of Saratoga, St. Catherine's Center for Children, and Trinity Alliance. The PPS is comprised of over 300 PAM @ trained individuals. As of 03/31/2017, a total of 22,933 PAMs@ were conducted, demonstrating the impact CBOs have when it comes to their ability to properly engage and resonate with the Medicaid Population.</p> <p>The PPS has actively contracted with its partners to perform outreach in the 5-county hot spots that were identified in the PPS' community needs assessment. In an attempt assess the UI, NU, and LU population on healthcare self-management, a number of our partners have performed outreach at family resource centers, food pantries (i.e. St. Vincent's) and homeless shelters. The partners were trained in supporting their Medicaid beneficiaries, assessing their patient activation levels, and further engaging them in coaching to assist the beneficiaries in getting to more positive health outcomes. As of 03/31/2017, a total of 2,049 PAMs have been administered in the PPS-defined hot spots – Albany County's three hot spots (836 PAMs), Columbia/Greene counties five hot spots (593 PAMs), and Warren/Saratoga counties six hot spots (620 PAMs).</p>   |
| <p>Survey the targeted population about healthcare needs in the PPS' region.</p>   | <p>BHNNY established a Consumer and Community Affairs Committee (CCAC) in May, 2015. This committee is comprised of organizations that represent the interests of Medicaid beneficiaries and is open to the public including Medicaid beneficiaries and their families. The intent of this committee is to represent the interests of Medicaid recipients and the uninsured; to provide feedback and recommendations to the PAC regarding the unique needs of consumers, and how these needs can be met during the planning and implantation phases of DSRIP. Due to the challenges of getting Medicaid recipients at the table, this CCAC has sponsored listening sessions across the 5-county region as areas where Medicaid Beneficiaries can speak openly and honestly about their concerns and how DSRIP can have a positive impact on their community. In March of 2016, BHNNY disseminated proposals to network partners requesting the facilitation of consumer listening sessions. To-date, a total of 29 sessions have been held across the 5 counties. Several host organizations that received funding were community-based organizations. During the sessions, beneficiaries were surveyed on the healthcare needs of themselves, their families and their communities. As a result, BHNNY was able to capture the recurring themes related to barriers and challenges to accessing healthcare. Consumer listening sessions will be facilitated throughout the life of DSRIP.</p> <p>In March 2017, PMO representatives were given the opportunity to meet with and engage beneficiaries in two-way conversations regarding health needs in the PPS regions. The first meeting took place with a group of 29 individuals at a community-based organization, Camino Nuevo, in Albany County. Participants were surveyed on patient activation, preventative care, and community health. Similarly, PMO personnel met with 9 individuals in one-on-one sessions in Greene County. Meetings took place at Greene County Family Planning. Discussions focused on individual healthcare needs, preventative care, and the individuals' ideas related to the best methods for health care program development and community awareness efforts.</p> |



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| Milestone Name   | Narrative Text  |
|--|---|
|  | The CCAC has also hosted several regional forums for DSRIP informational purposes throughout our 5-county region. These forums are community focused and have been held in collaboration with overlapping PPSs to ensure alignment of a clear and concise message to participating providers, community organizations, and Medicaid beneficiaries. The CCAC continues these discussions as they host their monthly committee meeting in our northern, southern, and central hub locations, allowing for face-to-face participation in each region.  |
| Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.   |   |
| 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). <ul style="list-style-type: none"> <li>• This patient activation project should not be used as a mechanism to inappropriately move members to different health plans and PCPs, but rather, shall focus on establishing connectivity to resources already available to the member.</li> <li>• Work with respective MCOs and PCPs to ensure proactive outreach to beneficiaries. Sufficient information must be provided regarding insurance coverage, language resources, and availability of primary and preventive care services. The state must review and approve any educational materials, which must comply with state marketing guidelines and federal regulations as outlined in 42 CFR §438.104.</li> </ul> | At this time, the MCOs within our 5 county region are hesitant to share this information. As we continue to meet with them monthly, we will develop an alternative way to report this information. All do confirm that they are actively meeting this milestone. Additionally, BHNNY Cares will proactively work with low and non-utilizing patients to reconnect them to care.   |
| Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM(R) 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.  |   |
| Include beneficiaries in development team to promote preventive care.  | To-date, a total of 29 consumer listening sessions have been sponsored across the AMCH PPS 5-county region. The listening sessions gave the PMO an opportunity to hear directly from Medicaid beneficiaries, not only what it means to be healthy for them, but, poignantly, what barriers remain in their paths to achieving positive health outcomes and being able to access the health care services they need. The focus groups, facilitated by PPS partners, allowed beneficiaries an opportunity to speak openly and honestly about their health care concerns, and their impressions of how DSRIP can have a positive impact on their communities. Several host organizations that received funding were community-based organizations. Nearly 300 Medicaid beneficiaries have participated in the consumer listening sessions. They have been instrumental in helping the PPS network to identify gaps to promote preventative care. Beneficiaries from the various populations participated in the listening sessions, including: homeless, LGBTQ, individuals with intellectual and developmental disabilities, refugees, seniors citizens, HIV+ individuals and addiction-challenged communities. In March 2017, PMO representatives were given the opportunity to meet with and engage beneficiaries in two-way conversations regarding health needs in the PPS regions. The first meeting took place with a group of 29 individuals at a community-based organization, Camino Nuevo, in Albany County. Participants were surveyed on patient activation, preventative care, and their impressions of health needs in their local communities. Similarly, PMO personnel met with 9 individuals in one-on-one sessions in Greene County. Meetings took place at Greene County Family Planning. Discussions focused on individual healthcare needs, preventative care, and the individuals' ideas related to the best methods for health care program development and community awareness efforts. |
| Measure PAM(R) components, including: <ul style="list-style-type: none"> <li>• Screen patient status (UI, NU and LU) and collect contact information</li> </ul>  |   |





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| Milestone Name   | Narrative Text   |
|--|--|
| <p>when he/she visits the PPS designated facility or "hot spot" area for health service.</p> <ul style="list-style-type: none"> <li>• If the beneficiary is UI, does not have a registered PCP, or is attributed to a PCP in the PPS' network, assess patient using PAM(R) survey and designate a PAM(R) score.</li> <li>• Individual member's score must be averaged to calculate a baseline measure for that year's cohort.</li> <li>• The cohort must be followed for the entirety of the DSRIP program.</li> <li>• On an annual basis, assess individual members' and each cohort's level of engagement, with the goal of moving beneficiaries to a higher level of activation.               <ul style="list-style-type: none"> <li>• If the beneficiary is deemed to be LU &amp; NU but has a designated PCP who is not part of the PPS' network, counsel the beneficiary on better utilizing his/her existing healthcare benefits, while also encouraging the beneficiary to reconnect with his/her designated PCP.</li> </ul> </li> <li>• The PPS will NOT be responsible for assessing the patient via PAM(R) survey.</li> <li>• PPS will be responsible for providing the most current contact information to the beneficiary's MCO for outreach purposes.</li> <li>• Provide member engagement lists to relevant insurance companies (for NU &amp; LU populations) on a monthly basis, as well as to DOH on a quarterly basis.</li> </ul> |  |
| <p>Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.</p>  |  |
| <p>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.</p>  |  |
| <p>Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.</p>   | <p>Better Health for Northeast New York developed a Client Complaint and Grievance Policy for the PPS. The Policy was developed by our Legal and Compliance teams in collaboration with the 2di team.</p> <p>The Key elements of the Policy include:</p> <ul style="list-style-type: none"> <li>Clarifying that this policy is intended to give Medicaid beneficiaries who are participating in a DSRIP initiative an avenue to grieve or complain to the PPS;</li> <li>A clear line of responsibility for who the Medicaid beneficiary can complain to at the PPS, and who is required to respond at the PPS level;</li> <li>How the PPS will respond;</li> <li>Time frames that client/patient can expect responses.</li> </ul> <p>The policy was written to include all the information a partner would need to either adopt in or implement the policy as their own. If a partner chooses to incorporate this information into their own policy they could use the BHNNY Complaint Policy as a template for what is needed in their existing policy. This policy is to be adopted by all contracted organizations within our PPS.</p> <p>The BHNNY PPS Client Complaint and Grievance Policy was adopted by the BHNNY Board of Directors on 3/24/2017.</p> |



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| Milestone Name   | Narrative Text  |
|--|---|
| <p>Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM(R).</p>   | <p>On July 16, 2015, BHNNY PMO, in collaboration with neighboring PPSs, provided a "Train the Trainer" PAM ® workshop. The workshop was facilitated by Insignia at Saratoga Hospital in Saratoga Spring, NY. There were a total of 19 BHNNY Partners in attendance. Attendees included; BHNNY PMO staff, participating CBO staff and healthcare providers. Since that initial workshop, the PPS has rolled out the "Train the Trainer" method across the five-county region, utilizing trained CBO and provider resources to administer training to staff in their organizations and/or across their region. As of 03/31/2017, the BHNNY has provided PAM® and Coaching for Activation (CFA) training to over of 30 organizations, most of which are categorized as CBOs who actively engage community members, especially the Medicaid population. CBOs trained – Alliance for Positive Health, Black Nurses Coalition, Catholic Charities, Community Caregivers, Healthy Capital District Initiative, Columbia County Community Healthcare Consortium, Inc., Independent Living Center of the Hudson Valley, Inc., Mental Health Empowerment Project, Northern Rivers, Planned Parenthood Mohawk Hudson, Planned Parenthood Upper Hudson, Shelters of Saratoga, St. Catherine's Center for Children and Trinity Alliance. The PPS is comprised of over 300 PAM ® trained individuals. A total of 22,933 PAMs®, as of 03/31/2017, were conducted which demonstrates the impact CBOs have when it comes to their ability to properly engage and resonate with the Medicaid population.</p> <p>In a March, 2017 survey of the PPS providers, it was determined that:</p> <p>225 personnel are actively administering the PAM throughout the PPS network.</p> <p>100 personnel are utilizing Insignia's Coaching for Activation to support Medicaid beneficiaries and the uninsured.</p> <p>In August 2016, PMO project leads attended a "super user" training provided by Insignia Health. The event included personnel from multiple PPSs. Key issues were discussed related to patient activation, including the concept of activation and its importance in the delivery of health care, the specific items measured by the PAM, unique levels of activation, and best practices to ensure that PAM results are valid, and accurately reflect the Medicaid and uninsured communities.</p> <p>In February, 2017, the PPS played a lead efforts collaborating with Amida Care PAM-related training. The training, held at the Alliance for Positive Health in Albany, offered an array of providers across all of the PPS' in the region and opportunity to explore the concept of "building trust and engagement." The training demonstrated techniques for motivational interviewing, and finding deep meaning as a coach when encountering that Medicaid and uninsured communities. A best practice document was created by Amida Care as a result of the group activities and discussions held at the training.</p> |
| <p>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 resources.</p> |   |
| <p>Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.</p>   |   |
| <p>Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.</p>  |   |
| <p>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.</p>   | <p>BHNNY conducted a survey in September 2015 to understand the current status of data collection within partner EHR systems, as well as any patient registries that organizations create on their own or report into from a population health perspective. In October 2015 BHNNY began collecting patient engagement data from partnering organizations with a POA and BAA in place on a quarterly basis. For each of the projects that the BHNNY is participating in, patients that received the defined services were reported by secure means via Movelt to a single point of contact in the AMCH PMO. Data includes patient first name, last name, Medicaid/CIN, date of service, and NPI or organization reporting. Data registry enhancements became a contract deliverable in July of 2016 and each project required additional data elements on a monthly basis. Each patient registry contains Medicaid patient's first name, last name, CIN, Date of Service, NPI, and additional defining elements depending on the project. A complete list of registries is below:</p>  |



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**Prescribed Milestones Narrative Text**

| Milestone Name | Narrative Text   |
|----------------|--|
|                | <p>The registry created for the 2di project is a registry of patients seen in a primary care setting that received a primary care or preventative visit while they were uninsured. This registry is used to target patients for a PAM survey as well as provides contact information for the CG-CAHPS survey requirement. Patient engagement is continuously tracked in the Flourish system and reported to DOH on a quarterly basis.</p> <p>The patient registries, along with patient engagement data, will be stored securely within the BHNNY PMO following the BHNNY Data Security and Confidentiality Plan protocol and utilized at an aggregate level as a means to help identify target areas of improvement. BHNNY patient registries and the accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure that engagement across the projects and participating organizations continues. As BHNNY identifies a secure means to share data, population health registries will also help organizations target patients for project participation. The EHR subcommittee, project subcommittees, the Technology and Data Management Committee, as well as other appropriate stakeholders will play a collaborative and active role in creating and updating additional registries as necessary.</p> |

**Milestone Review Status**

| Milestone #   | Review Status                    | IA Formal Comments   |
|---------------|----------------------------------|--|
| Milestone #1  | Pass & Ongoing                   |  |
| Milestone #2  | Pass & Complete                  |  |
| Milestone #3  | Pass & Complete                  |  |
| Milestone #4  | Pass & Complete                  |  |
| Milestone #5  | Pass & Ongoing                   |  |
| Milestone #6  | Pass & Complete                  |  |
| Milestone #7  | Pass & Ongoing                   |  |
| Milestone #8  | Pass & Complete                  |  |
| Milestone #9  | Pass & Ongoing                   |  |
| Milestone #10 | Pass & Ongoing                   |  |
| Milestone #11 | Pass & Ongoing                   |  |
| Milestone #12 | Pass & Complete                  |  |
| Milestone #13 | Pass (with Exception) & Complete | The PPS should ensure that Provider Engagement documentation is submitted via the appropriate project tab in MAPP. |
| Milestone #14 | Pass & Ongoing                   |  |
| Milestone #15 | Pass & Ongoing                   |  |
| Milestone #16 | Pass & Ongoing                   |  |
| Milestone #17 | Pass & Complete                  |  |



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**✔ IPQR Module 2.d.i.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name                | Status    | Description           | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|------------------------------------|-----------|-----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment  | Completed | Mid-Point Assessment  | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| Milestone<br>AMCH PPS PAM data P4R | Completed | AMCH PPS PAM data P4R | 10/01/2016          | 12/31/2016        | 10/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |
| Milestone<br>PAM P4R               | Completed | PAM P4R               | 10/01/2016          | 12/31/2016        | 10/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name        | Narrative Text |
|-----------------------|----------------|
| Mid-Point Assessment  |                |
| AMCH PPS PAM data P4R |                |
| PAM P4R               |                |



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**IPQR Module 2.d.i.5 - IA Monitoring**

**Instructions :**



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**Project 3.a.i – Integration of primary care and behavioral health services**

**✓ IPQR Module 3.a.i.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Risks for this project fall into three categories: logistical, financial/regulatory and organizational. The logistical risk relates to resource availability, including availability of clinical, counseling and office space, equipment, pharmacy resources, staff, IT, and materials. This project is dependent on these logistical resources in ways that others are not. The financial/regulatory risk relates to the need to create contracts with MCO's, to support payment for services, such as SBIRT and BH screenings. Alternative payment models for integrated care must be created allowing for co-located models in a VBP setting. For model 1, relevant staff will complete OASAS approved SBIRT training. Article 28 clinics will secure waivers allowing psychotherapy services by licensed practitioners. For Model 2, Article 31 clinical service providers will be required to secure waivers allowing on-site preventive, evaluation and management services. Model 3's will have to contract with a psychiatrist(s) to reflect consultation services. Article 28 clinics, allow individual and group psychotherapy services by licensed mental health practitioners, including clinical social workers. Lastly, BH staff must meet regulations required to Depression CM's including training on assessment, engagement, psychoeducational, and brief psychotherapeutic modalities as part of IMPACT. The third risk relates to organizational challenges. Changes to EHRs, new relationships and risks are inevitable for all models. Model 1 organizations will execute collaborative agreements with at least one outpatient specialty MH and outpatient SU treatment to extend services beyond on-site scope. Agreements will include access to care standards for referred patients, follow-up report standards, etc. Model 2 organizations will develop a collaborative agreement with specialty providers to address conditions beyond their on-site scope.

EHR will expand in decision support and pathways of care; Model 1 will expand to consider positive screenings for BH conditions, Model 2 will expand to include positive screenings for physical health conditions. Also, consulting agreements will be executed between PCMH and a consulting psychiatrist to provide the clinical and supervisory services described in the model. Similar agreements will be made with outpatient specialty mental health providers.

To mitigate these risks, the AMCH PMO and PPS will:

The Clinical Quality Affairs Committee (CQAC) led by the DSRIP Medical Director will create process and procedures to integrate providers. Workforce training vendors will provide resources for additional or new responsibilities. Working collaboratively with local NP, PA, social work, and psych program schools, behavioral health (BH) intern opportunities will be encouraged with job opportunities. Client-facing staff in all models will complete training on the new basic health challenges. This will include implementation of U.S. Preventative Services Task Force recommended screenings into clinical policy.

Model 3 risks are rooted in workflow changes and skill-set expansion. IMPACT combines a Care Manager (CM) and Consulting Psychiatrist to support the PCP, producing unique workflow risks. To prepare, providers will complete training on IMPACT and prescribing standards for basic psychotropic medications. Furthermore, relationships with the consulting psychiatrist will be established with primary care providers (PCP) to consult on complex cases. A similar relationship could be bridged with an Addiction Medicine specialist. Also, CM's and other staff must receive training on MDD symptomology, physiological effects, treatment options, self-management support, and Problem-Solving Treatment in PC. Eventually evidence-based protocols will be disseminated throughout organizations for universal screening of all patients with depression using PHQ-2.



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**✔ IPQR Module 3.a.i.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY3,Q4                 | 24,875                 |

|              | Year,Quarter             | DY2,Q1  | DY2,Q2  | DY2,Q3  | DY2,Q4  |
|--------------|--------------------------|---------|---------|---------|---------|
| PPS Reported | Baseline Commitment      | 5,324   | 12,438  | 14,333  | 16,238  |
|              | Quarterly Update         | 13,096  | 14,973  | 14,973  | 19,687  |
|              | Percent(%) of Commitment | 245.98% | 120.38% | 104.47% | 121.24% |
| IA Approved  | Quarterly Update         | 0       | 4,508   | 0       | 7,995   |
|              | Percent(%) of Commitment | 0.00%   | 36.24%  | 0.00%   | 49.24%  |

**Current File Uploads**

| User ID  | File Type | File Name  | File Description                     | Upload Date         |
|----------|-----------|--|--------------------------------------|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ3ai_MDL3ai2_PES_TRAIN_AMCH_PPS__3_A_I_FINAL_FOR_MAPP_UPLOAD_14065.xlsx | AMCH PPS_3_A_I FINAL FOR MAPP UPLOAD | 04/28/2017 08:44 AM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments   |
|---------------|--|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4 |



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**✔ IPQR Module 3.a.i.3 - Prescribed Milestones**

| Models Selected |         |         |
|-----------------|---------|---------|
| Model 1         | Model 2 | Model 3 |

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Project Model Name | Reporting Level | Provider Type                              | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|--------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.  | DY3 Q2              | Model 1            | Project         | N/A  | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>All eligible practices meet NCQA 2014 Level 3 PCMH and/or APCM standards by the end of DY3.   |                     |                    | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Behavioral health services are co-located within PCMH/APC practices and are available.  |                     |                    | Provider        | Mental Health                              | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQAC Level 3 PCMH recognition or APCM by DY 3.  |                     |                    | Project         |  | In Progress | 10/19/2015          | 09/30/2017        | 10/19/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQAC Level 3 PCMH recognition or APCM.  |                     |                    | Project         |  | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current |                     |                    | Project         |  | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |





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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Project Model Name | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| certifications.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:4. Perform a practice-specific gap analysis to determine the financial, technical and operational support needed to assure successful recognition by DY3.                                  |                     |                    | Project         |               | In Progress | 07/01/2016          | 09/30/2017        | 07/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.                           |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQAC Level 3 certified or APCM. |                     |                    | Project         |               | In Progress | 12/07/2015          | 09/30/2017        | 12/07/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:7. Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY 3.        |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:8. Monitor progress on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Track site specific certification to assure all participating safety-net providers become Level 3 PCMH certified or APCM.   |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:1. Establish behavioral health (BH) sub-committee to work in collaboration with the PPS wide PCMH sub-committee.   |                     |                    | Project         |               | Completed   | 10/19/2015          | 06/30/2016        | 10/19/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:2. Perform an assessment of participating practitioners' current behavioral health service delivery capabilities, work flow, IT infrastructure, interoperability, staffing, etc.           |                     |                    | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:3. Educate leadership within each organization participating in project of the benefits of co-located  |                     |                    | Project         |               | Completed   | 10/26/2015          | 06/30/2016        | 10/26/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |



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|--|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| behavioral health services within a primary care setting.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:4. PCMH/BH sub-committee to develop evidence-based best practice models for co-locating behavioral health services in a primary care setting.  |                     |                    | Project         |               | In Progress | 06/30/2016          | 09/30/2017        | 06/30/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:5. Perform gap analysis and identify key priorities to successful completion of co-located services.   |                     |                    | Project         |               | In Progress | 06/30/2016          | 09/30/2017        | 06/30/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:6. Create a list of BH service providers available for co-location including BH organizations willing to establish partnership arrangements.   |                     |                    | Project         |               | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:7. Develop alliances between BH service providers and primary care sites and, if required, complete written agreements between BH service providers and primary care sites.                                  |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2016        | 10/05/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:8. AMCH PMO will assist participating practitioners with obtaining the necessary waivers, licensure, and/or certification to provide the additional on-site services.  |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2016        | 10/05/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:9. MCOs will be engaged to ensure payment mechanisms are in place for co-location of services.   |                     |                    | Project         |               | In Progress | 11/23/2015          | 09/30/2017        | 11/23/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:10. Develop an implementation work plan that addresses initial and ongoing training needs of the staff, sustainability issues, and reporting requirements.   |                     |                    | Project         |               | In Progress | 06/01/2016          | 09/30/2017        | 06/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:11. Provide support, trainings, resources and education to participating providers as needed to ensure successful implementation of co-located behavioral health services.                                   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:12. Provide training for all staff, including client-facing administrative staff, on the new protocols and their roles and responsibilities with respect to screening and treatment of behavioral health and |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|---|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| physical health conditions, consistent with scope of practice and licensure.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:13. In collaboration with the WCC, ensure that relevant staff have completed an OASAS approved SBIRT training, prior to offering and billing for SBIRT services.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:14. Participating practitioners to develop protocols for after-hours access to care, whether through expanded hours or after-hours call line for triaging urgent conditions.  |                     |                    | Project         |               | In Progress | 06/30/2016          | 09/30/2017        | 06/30/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:15. Monitor progress towards completion of co-located services, as well as sustainability by PMO.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #2</b><br>Develop collaborative evidence-based standards of care including medication management and care engagement process.  | DY2 Q4              | Model 1            | Project         | N/A           | Completed   | 11/16/2015          | 03/31/2017        | 11/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Regularly scheduled formal meetings are held to develop collaborative care practices.  |                     |                    | Project         |               | Completed   | 11/16/2015          | 03/31/2017        | 11/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Coordinated evidence-based care protocols are in place, including medication management and care engagement processes.   |                     |                    | Project         |               | Completed   | 11/16/2015          | 03/31/2017        | 11/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Establish regularly scheduled meetings with leadership from participating providers to develop best practice protocols.  |                     |                    | Project         |               | Completed   | 11/16/2015          | 03/31/2016        | 11/16/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:2. Assist with identification of key team members needed at formal meetings who will assist with assigning roles and responsibilities for practice specific implementation and action plans to engage behavioral health specialists |                     |                    | Project         |               | Completed   | 11/16/2015          | 12/31/2015        | 11/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Finalize collaborative care practices, reviewed and approved by the Clinical and Quality Affairs Committee (CQAC).   |                     |                    | Project         |               | Completed   | 04/21/2016          | 03/31/2017        | 04/21/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|---|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:4. As a contractual requirement, participating providers will implement, at the minimum, weekly interdisciplinary team huddles to review current list of patients and ongoing development of team approach. Every other week interdisciplinary team meetings will focus on case consultation (at least monthly) and overall development of team approach. |                     |                    | Project         |               | Completed   | 10/01/2016          | 12/31/2016        | 10/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |
| <b>Task</b><br>M2:1. BH/PCMH sub-committee will review established evidence-based guidelines and protocols for BH co-location including medication management and care engagement processes. The sub-committee will draft guidelines that will be reviewed and adopted by the CQAC.   |                     |                    | Project         |               | Completed   | 01/01/2016          | 12/31/2016        | 01/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |
| <b>Task</b><br>M2:2. Participating practices will develop site specific operational policies and procedures describing how evidence-based guidelines will be integrated into care at their sites (i.e. stepped treatment and medication algorithm and care engagement processes).   |                     |                    | Project         |               | Completed   | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Develop and implement evidence-based care protocols, to include, managing positive screenings including follow-up assessment, crisis/high risk response plan, and treatment.   |                     |                    | Project         |               | Completed   | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:4. Monitor the outcomes of developed protocols and update evidence-based guidelines as needed with approval by CQAC.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #3</b><br>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.  | DY3 Q2              | Model 1            | Project         | N/A           | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Policies and procedures are in place to facilitate and document completion of screenings.  |                     |                    | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Screenings are documented in Electronic Health   |                     |                    | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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|---|---------------------|--------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Record.   |                     |                    |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>At least 90% of patients receive screenings at the established project sites (Screenings are defined as industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT).                              |                     |                    | Project         |  | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Positive screenings result in "warm transfer" to behavioral health provider as measured by documentation in Electronic Health Record.  |                     |                    | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Develop protocols for universal screening for behavioral health conditions using evidence-based tools, including, at a minimum, use of PHQ-2 for depression and SBIRT screening tool for alcohol use.                    |                     |                    | Project         |  | Completed   | 04/21/2016          | 03/31/2017        | 04/21/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1: 2. Finalize policies and procedures to facilitate and document completion of the above screenings. These policies and procedures will be reviewed and approved by CQAC.  |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Policies will be disseminated for implementation. Technical assistance will be provided for participating providers to facilitate implementation based on gap analysis of current state and future implementation state. |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Monitor outcomes and sustainability of implemented screening protocols by PMO.   |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Ensure a policy is established and implemented for timely documentation of screenings in the electronic health record.   |                     |                    | Project         |  | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:2. Ensure timely and accurate documentation in the electronic health record.  |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:1. Assess participating providers current rates of completion of PHQ-2 and SBIRT patient assessments tools.   |                     |                    | Project         |  | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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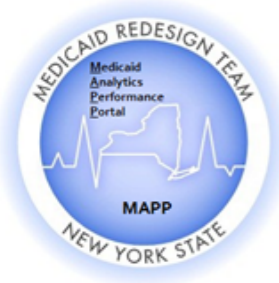
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|---|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M3:2. Develop a documented process to ensure completion of PHQ and SBIRT assessments for appropriate patients.   |                     |                    | Project         |               | In Progress | 04/21/2016          | 09/30/2017        | 04/21/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M3:3. In collaboration with WCC, provide education and training of PHQ and SBIRT assessment tools, as needed.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Ensure implementation of approved process for ongoing screenings.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:5. Monitor success towards completion of screenings on 90% of patients engaged in project, and provide improvement plans as needed to ensure success. |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M4:1. Assess participating providers' current procedures for managing patients who receive a positive screening.   |                     |                    | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M4:2. Create and finalize policies on implementing "warm transfers" for patients who have a positive screening.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:3. Provide education/training as needed by sub-committee to ensure success.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:4. Implement "warm transfer" policies and procedures, as well as instructions on appropriate documentation in the electronic health record.           |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:5. Monitor outcomes and sustainability of implemented "warm transfer" protocols.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #4</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.   | DY2 Q4              | Model 1            | Project         | N/A           | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>EHR demonstrates integration of medical and behavioral health record within individual patient   |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |

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|--|---------------------|--------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| records.   |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     |                    | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. In collaboration with TDMC, perform a current state assessment of E.H.R. capabilities for integration.  |                     |                    | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Perform gap analysis and identify priorities to achieving integration of patient record. PPS will assist participating providers with increased awareness of HIXNY and SHIN-NY capabilities for implementation. |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Technical support provided by PCMH sub-committee as needed.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Completion/confirmation of an integrated health record at each participating organization.  |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 02/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Assess E.H.R. connectivity and utilization patterns for each participating provider.  |                     |                    | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Disseminate standardized IT protocols and data security requirements across the system.   |                     |                    | Project         |               | Completed | 06/15/2016          | 03/31/2017        | 06/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Education/Training provided as needed to participating providers on how to utilize the technical platform.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Provide education/training as needed to participating providers on how to identify targeted patients and track those who are actively engaged for milestone reporting.  |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:5. Sub-committee to make recommendations to CQAC on best methods to track outcomes and quality indicators to ensure success.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:6. Implement CQAC's policy to track outcomes   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|--------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| and monitor progress.  |                     |                    |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Milestone #5</b><br>Co-locate primary care services at behavioral health sites.   | DY3 Q2              | Model 2            | Project         | N/A  | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Primary care services are co-located within behavioral Health practices and are available.  |                     |                    | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Primary care services are co-located within behavioral Health practices and are available.  |                     |                    | Provider        | Mental Health                              | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQAC Level 3 PCMH recognition or APCM by DY 3.  |                     |                    | Project         |  | Completed   | 10/19/2015          | 06/30/2016        | 10/19/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQAC Level 3 PCMH recognition or APCM.  |                     |                    | Project         |  | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current certifications. |                     |                    | Project         |  | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4 Perform a practice-specific gap analysis to determine the needed financial, technical and operational support needed to assure successful recognition by DY3.  |                     |                    | Project         |  | In Progress | 07/01/2016          | 09/30/2017        | 07/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.   |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Create a learning collaborative for participating safety-net providers to assist in the development of  |                     |                    | Project         |  | In Progress | 12/07/2015          | 09/30/2017        | 12/07/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |





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| necessary workflows and other changes to become NCQAC Level 3 certified or APCM.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:7. Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY3.                |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:8. Monitor progress on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Track site specific certification to assure all participating safety-net providers become NCQA Level 3 PCMH certified or APCM.   |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:1. Establish behavioral health (BH) sub-committee to work in collaboration with the PPS wide PCMH sub-committee.  |                     |                    | Project         |               | Completed   | 10/19/2015          | 06/30/2016        | 10/19/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:2. Perform an assessment of participating practitioners' current behavioral health and primary care service delivery capabilities, work flow, IT infrastructure, interoperability, staffing, etc. |                     |                    | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:3. Educate leadership within each organization participating in the project about the benefits of co-located primary care services within a behavioral health service setting.                    |                     |                    | Project         |               | Completed   | 10/26/2015          | 06/30/2016        | 10/26/2015 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:4. BH/PCMH sub-committees to develop evidence-based best practice models for co-locating primary care services in a behavioral health service setting.  |                     |                    | Project         |               | In Progress | 06/24/2016          | 09/30/2017        | 06/24/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:5. Perform gap analysis and identify key priorities to successful completion of co-located services.  |                     |                    | Project         |               | In Progress | 06/24/2016          | 09/30/2017        | 06/24/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:6. Create a list of primary care service providers available for co-location including primary care service   |                     |                    | Project         |               | In Progress | 09/28/2015          | 09/30/2017        | 09/28/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| organizations willing to establish partnership arrangement.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:7. Develop alliances between BH service providers and primary care sites and, if required, complete written agreements between BH service providers and primary care sites.  |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2016        | 10/05/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:8. Ensure that the participating practitioners have obtained the necessary waivers, licensure, and/or certification to provide the additional on-site services.              |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2016        | 10/05/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:9. MCOs will be engaged to ensure payment mechanisms are in place for co-location of services.   |                     |                    | Project         |               | In Progress | 11/23/2015          | 09/30/2017        | 11/23/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:10. Develop an implementation work plan that addresses; initial and ongoing training needs of the staff, sustainability issues, and reporting requirements.                  |                     |                    | Project         |               | In Progress | 06/01/2016          | 09/30/2017        | 06/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:11. Provide support, trainings, resources and education to participating providers as needed to ensure successful completion of co-located primary care services.            |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:12. In collaboration with the WCC, ensure that relevant staff have completed an OASAS approved SBIRT training, prior to offering and billing for SBIRT services.             |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:13. Ensure all client-facing staff complete training on chronic illness management including common physical health medications, preventive care, and chronic conditions.    |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:14. Participating practitioners to develop protocols for after-hours access to care, whether through expanded hours or after-hours call line for triaging urgent conditions. |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:15. Ensure that the primary care service space has   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| been appropriately outfitted for compliance with NYS regulations and associated waivers.  |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:16. Monitor progress towards completion of co-located services, as well as sustainability by PMO.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #6</b><br>Develop collaborative evidence-based standards of care including medication management and care engagement process.  | DY2 Q4              | Model 2            | Project         | N/A           | Completed | 11/16/2015          | 03/31/2017        | 11/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Regularly scheduled formal meetings are held to develop collaborative care practices.  |                     |                    | Project         |               | Completed | 11/16/2015          | 03/31/2017        | 11/16/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Coordinated evidence-based care protocols are in place, including a medication management and care engagement process.   |                     |                    | Project         |               | Completed | 01/01/2016          | 03/31/2017        | 01/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Establish regularly scheduled meetings with leadership from participating providers to develop best practice protocols.  |                     |                    | Project         |               | Completed | 11/16/2015          | 03/31/2016        | 11/16/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:2. Assist with identification of key team members needed at formal meetings who will assist with assigning roles and responsibilities for practice specific implementation and action plans to engage primary care specialists.   |                     |                    | Project         |               | Completed | 11/16/2015          | 12/31/2015        | 11/16/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Finalize collaborative care practices, reviewed and approved by the Clinical and Quality Affairs Committee (CQAC).   |                     |                    | Project         |               | Completed | 04/21/2016          | 03/31/2017        | 04/21/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. As a contractual requirement, participating providers will implement, at the minimum, weekly interdisciplinary team huddles to review current list of patients and ongoing development of team approach. Every other week interdisciplinary team meetings will focus on case consultation (at least monthly) and overall development of team approach. |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. BH/PCMH sub-committees will review   |                     |                    | Project         |               | Completed | 01/01/2016          | 12/31/2016        | 01/01/2016 | 12/31/2016 | 12/31/2016       | DY2 Q3                           |



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| established evidence-based guidelines and protocols for primary care co-location including medication management and care engagement processes. The sub-committee will draft guidelines that will be reviewed and adopted by the CQAC.   |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:2. Participating practices will develop site specific operational polices and procedures describing how evidence-based guidelines will be integrated into care at their sites (i.e. stepped treatment and medication algorithm and care engagement processes).   |                     |                    | Project         |               | Completed   | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Develop and implement protocols for screening, assessment, crisis/high risk response plan, and treatment including development of an integrated care plan, follow-up, and management for at least one target condition (e.g., diabetes, hypertension, obesity, chronic pain).   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Monitor the outcomes of developed protocols and update evidence-based guidelines as needed with approval by CQAC.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #7</b><br>Conduct preventive care screenings, including physical and behavioral health screenings.  | DY3 Q2              | Model 2            | Project         | N/A           | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Screenings are conducted for all patients. Process workflows and operational protocols are in place to implement and document screenings.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>Screenings are documented in Electronic Health Record.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>At least 90% of patients receive primary care services, as defined by preventive care screenings at the established project sites (Screenings are defined as physical health screenings for primary care services and industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT for behavioral health). |                     |                    | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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|---|---------------------|--------------------|-----------------|--|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>Positive screenings result in "warm transfer" to behavioral health or primary care provider as indicated by screening as measured by documentation in Electronic Health Record (EHR).  |                     |                    | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Positive screenings result in "warm transfer" to behavioral health or primary care provider as indicated by screening as measured by documentation in Electronic Health Record (EHR).  |                     |                    | Provider        | Mental Health                              | In Progress | 07/01/2016          | 09/30/2017        | 07/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Develop and implement protocols for universal screening for behavioral health conditions using evidence-based tools, including, at a minimum, use of PHQ-2 for depression and SBIRT screening tool for alcohol use.  |                     |                    | Project         |  | In Progress | 04/01/2015          | 03/31/2020        | 02/01/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. Develop and implement clinic policies and procedures to reflect U.S. Preventive Services Task Force recommended screenings for all appropriate patients.   |                     |                    | Project         |  | In Progress | 04/01/2015          | 03/31/2020        | 02/01/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. Provide training for all staff, including client-facing administrative staff, on the new workflows and operational protocols and their roles and responsibilities with respect to screening and treatment of behavioral health and physical health conditions consistent with scope of practice and licensure. |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Monitor outcomes and sustainability of implemented screening protocols by PMO.   |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Ensure a policy is established and implemented for timely documentation of screenings in the electronic health record.   |                     |                    | Project         |  | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:2. Ensure timely and accurate documentation in the electronic health record.  |                     |                    | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:1. Assess participating providers current rates of  |                     |                    | Project         |  | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| completion of PHQ-2 and SBIRT patient assessments tools.  |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M3:2. Develop a documented process to ensure completion of PHQ and SBIRT assessments for appropriate patients.   |                     |                    | Project         |               | In Progress | 06/24/2016          | 09/30/2017        | 06/24/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M3:3. In collaboration with WCC, provide education and training of PHQ and SBIRT assessment tools, as needed.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Ensure implementation of approved process for ongoing screenings.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:5. Monitor success towards completion of screenings on 90% of patients engaged in project, and provide improvement plans as needed to ensure success. |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M4:1. Assess participating providers' current procedures for managing patients who receive a positive screening.   |                     |                    | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M4:2. Create and finalize policies on implementing "warm transfers" for patients who have a positive screening.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:3. Provide education/training as needed by sub-committee to ensure success.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:4. Implement "warm transfer" policies and procedures, as well as instructions on appropriate documentation in the electronic health record.           |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M4:5. Monitor outcomes and sustainability of implemented "warm transfer" protocols.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #8</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.   | DY2 Q4              | Model 2            | Project         | N/A           | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b>   |                     |                    | Project         |               | Completed   | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| EHR demonstrates integration of medical and behavioral health record within individual patient records.  |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     |                    | Project         |               | Completed | 10/05/2015          | 03/31/2017        | 10/05/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. In collaboration with TDMC, perform a current state assessment of E.H.R. capabilities for integration.  |                     |                    | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Perform gap analysis and identify priorities to achieving integration of patient record. PPS will assist participating providers with increased awareness of HIXNY and SHIN-NY capabilities for implementation. |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Technical support provided by PCMH sub-committee as needed.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Completion/confirmation of an integrated health record at each participating organization.  |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 02/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Assess E.H.R. connectivity and utilization patterns for each participating provider.  |                     |                    | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Disseminate standardized IT protocols and data security requirements across the system.   |                     |                    | Project         |               | Completed | 06/15/2016          | 03/31/2017        | 06/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Education/Training provided as needed to participating providers on how to utilize the technical platform.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Provide education/training as needed to participating providers on how to identify targeted patients and track those who are actively engaged for milestone reporting.  |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:5. Sub committee to make recommendations to CQAC on best methods to track outcomes and quality indicators to ensure success.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| <b>Task</b><br>M2:6. Implement CQAC's policy to track outcomes and monitor progress.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #9</b><br>Implement IMPACT Model at Primary Care Sites.  | DY3 Q2              | Model 3            | Project         | N/A           | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has implemented IMPACT Model at Primary Care Sites.  |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Establish behavioral health (BH) sub-committee to work in collaboration with the PPS wide PCMH sub-committee to guide the implementation of IMPACT Model at participating primary care sites.  |                     |                    | Project         |               | Completed   | 04/21/2016          | 06/30/2016        | 04/21/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Perform an assessment of participating practitioners' current behavioral health and primary care service delivery capabilities, work flow, IT infrastructure, interoperability, staffing, etc.   |                     |                    | Project         |               | Completed   | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Educate leadership and clinicians within each organization participating in project of the benefits of IMPACT model.   |                     |                    | Project         |               | Completed   | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:4. BH/PCMH sub-committees to develop evidence-based best practice models for implementing IMPACT model at primary care settings.  |                     |                    | Project         |               | In Progress | 06/30/2016          | 09/30/2017        | 06/30/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:5. Ensure that the participating practitioners have obtained the necessary waivers, licensure, and/or certification to provide the additional on-site services.   |                     |                    | Project         |               | In Progress | 06/30/2016          | 09/30/2017        | 06/30/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:6. Work with Managed Care Organizations to facilitate adequate reimbursement for treatment interventions that are required elements of collaborative care models. These financial agreements may include fee-for-service, case rate, and pay-for-performance reimbursement schemes. |                     |                    | Project         |               | In Progress | 05/20/2016          | 09/30/2017        | 05/20/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:7. Develop an implementation work plan that addresses initial and ongoing training needs of the   |                     |                    | Project         |               | In Progress | 06/01/2016          | 09/30/2017        | 06/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |





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|--|---------------------|--------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| staff, sustainability issues, and reporting requirements.  |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:8. In collaboration with the WCC, ensure that relevant staff have completed an OASAS approved SBIRT training, prior to offering and billing for SBIRT services.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Participating practitioners to develop protocols for after-hours access to care, whether through expanded hours or after-hours call line for triaging urgent conditions.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:10. Monitor provider transformation sustainability and outcomes with implementation of IMPACT Model by the Project Management Office (PMO).  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #10</b><br>Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.   | DY2 Q4              | Model 3            | Project         | N/A           | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Coordinated evidence-based care protocols are in place, including a medication management and care engagement process to facilitate collaboration between primary care physician and care manager.  |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Policies and procedures include process for consulting with Psychiatrist.   |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. BH/PCMH sub-committee will review established evidence-based guidelines and protocols for the depression care management using the IMPACT model including medication management and care engagement processes. The sub-committee will draft guidelines that will be reviewed and adopted by the CQAC. |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. Participating practices will develop site specific operational policies and procedures describing how evidence-based guidelines will be integrated into care  |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|--|---------------------|--------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| at their sites (i.e. stepped treatment and medication algorithm and care engagement processes).  |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Develop and implement evidence-based care protocols for operationalizing IMPACT model, to include, follow-up assessment, crisis/high risk response plan, and treatment. |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:4. Monitor the outcomes of developed protocols and update evidence-based guidelines as needed with approval by CQAC.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Sub-committee will assess current participating providers best-practices to begin to formulate implementable policies and procedures for psychiatrist consultation.     |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:2. Develop draft evidence-based policies and procedures for consulting with a psychiatrist.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Finalize policies, procedures and protocols with approval by the CQAC.  |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:4. In collaboration with WCC, ensure appropriate staff are provided education, training and resources as needed for successful implementation of policies and procedures.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:5. Implement policies, procedures and protocols for successful consultation with psychiatrist.   |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:6. Monitor outcomes of developed policies, procedures and protocol and update as needed.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #11</b><br>Employ a trained Depression Care Manager meeting requirements of the IMPACT model.   | DY2 Q4              | Model 3            | Project         | N/A           | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS identifies qualified Depression Care Manager (can be a nurse, social worker, or psychologist) as identified in Electronic Health Records.                                 |                     |                    | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|---|---------------------|--------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>Depression care manager meets requirements of IMPACT model, including coaching patients in behavioral activation, offering course in counseling, monitoring depression symptoms for treatment response, and completing a relapse prevention plan.  |                     |                    | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1 Identify qualified staff member to serve as DCM and be identified as such in the Electronic Health Record (E.H.R.).   |                     |                    | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. In collaboration with WCC, establish job description of DCM as defined by IMPACT model.  |                     |                    | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:2. Evaluate clinical competency of the DCMs to ensure that standards of the IMPACT model are met. In collaboration with the WCC, develop training protocols and procedures for DCM role to ensure they are efficient in all required IMPACT interventions.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Provide training to DCM on Major Depressive Disorder symptomatology, physiologic effects, and biopsychosocial cycle; treatment options including antidepressant medications (basics of dosing and side effects), Cognitive-Behavioral Therapy, and Interpersonal Therapy; self-management support through education, behavioral activation, Problem-Solving Treatment in Primary Care (PST-PC) and motivational interviewing (MI). |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Continuously monitor and re-evaluate the effectiveness of the individual/individuals in the DCM position to ensure that the requirements of IMPACT model continue to be met into the future.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #12</b><br>Designate a Psychiatrist meeting requirements of the IMPACT Model.  | DY2 Q4              | Model 3            | Project         | N/A           | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>All IMPACT participants in PPS have a designated Psychiatrist.   |                     |                    | Project         |               | Completed | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|---|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:1. Establish contract or employment agreement with participating Psychiatrists to provide the clinical and supervisory services described in the IMPACT model.  |                     |                    | Project         |               | Completed   | 10/01/2016          | 03/31/2017        | 10/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:2. Provide assistance with resources for successful training/hiring of designated psychiatrists to ensure they are able to adequately perform the requirements of the position as created in Milestone 12; metric1; step 1. |                     |                    | Project         |               | Completed   | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:3. Continuously monitor and evaluate the availability of psychiatrists to adequately perform the requirements of the model.   |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #13</b><br>Measure outcomes as required in the IMPACT Model.   | DY3 Q2              | Model 3            | Project         | N/A           | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>At least 90% of patients receive screenings at the established project sites (Screenings are defined as industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT).                              |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Assess participating providers current rates of completion of PHQ-2 and SBIRT patient assessments tools.   |                     |                    | Project         |               | Completed   | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Develop a documented process to ensure completion of PHQ and SBIRT assessments for appropriate patients.   |                     |                    | Project         |               | In Progress | 04/21/2016          | 09/30/2017        | 04/21/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. In collaboration with WCC, provide education and training of PHQ and SBIRT assessment tools, as needed.  |                     |                    | Project         |               | In Progress | 10/01/2016          | 09/30/2017        | 10/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:4. Ensure implementation of approved process for ongoing screenings.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Monitor success towards completion of screenings on 90% of patients engaged in project, and  |                     |                    | Project         |               | In Progress | 04/01/2016          | 09/30/2017        | 04/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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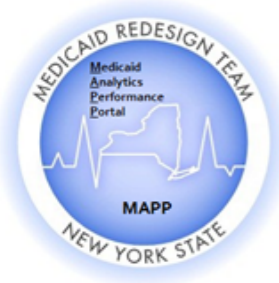
**Albany Medical Center Hospital (PPS ID:1)**

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Project Model Name | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|--------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| provide improvement plans as needed to ensure success.   |                     |                    |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Milestone #14</b><br>Provide "stepped care" as required by the IMPACT Model.  | DY3 Q2              | Model 3            | Project         | N/A           | In Progress | 10/01/2016          | 09/30/2017        | 10/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>In alignment with the IMPACT model, treatment is adjusted based on evidence-based algorithm that includes evaluation of patient after 10-12 weeks after start of treatment plan.              |                     |                    | Project         |               | In Progress | 10/01/2016          | 09/30/2017        | 10/01/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>1. Draft protocols to adjust treatment according to evidence-based algorithm if a patient is not improving, including a patient evaluation 10-12 weeks after the start of the treatment plan. |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Implement protocols related to patient evaluation at the 10-12 week mark after treatment plan approval by the CQAC.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. Monitor outcomes to ensure success and ongoing sustainability of protocols.  |                     |                    | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #15</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.   | DY2 Q4              | Model 3            | Project         | N/A           | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>EHR demonstrates integration of medical and behavioral health record within individual patient records.   |                     |                    | Project         |               | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     |                    | Project         |               | Completed   | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. In collaboration with TDMC, perform a current state assessment of E.H.R. capabilities for integration.  |                     |                    | Project         |               | Completed   | 04/01/2016          | 06/30/2016        | 04/01/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:2. Perform gap analysis and identify priorities to achieving integration of patient record. PPS will assist participating providers with increased awareness of                            |                     |                    | Project         |               | Completed   | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |

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|---|---------------------|--------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| HIXNY and SHIN-NY capabilities for implementation.  |                     |                    |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Technical support provided by PCMH sub-committee as needed.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Completion/confirmation of an integrated health record at each participating organization.   |                     |                    | Project         |               | Completed | 04/01/2015          | 03/31/2020        | 02/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. Assess E.H.R. connectivity and utilization patterns for each participating provider.   |                     |                    | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Disseminate standardized IT protocols and data security requirements across the system.  |                     |                    | Project         |               | Completed | 06/15/2016          | 03/31/2017        | 06/15/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Workflow and registries are created to track and trend PHQ-9 scores.   |                     |                    | Project         |               | Completed | 06/30/2016          | 03/31/2017        | 06/30/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:4. Education/Training provided as needed to participating providers on how to utilize the technical platform.   |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:5. Provide education/training as needed to participating providers on how to identify targeted patients and track those who are actively engaged for milestone reporting. |                     |                    | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:6. Sub committee to make recommendations to CQAC on best methods to track outcomes and quality indicators to ensure success.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:7. Implement CQAC's policy to track outcomes and monitor progress.  |                     |                    | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name  | User ID | File Type           | File Name  | Description                    | Upload Date         |
|---|---------|---------------------|--|--------------------------------|---------------------|
| Develop collaborative evidence-based standards of care including medication management and care engagement process. | mcintyc | Policies/Procedures | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES2_P&P_BHNNY_3ai_Milestone_2_Partner_Supporting_Documentation_12929.pdf | BHNNY 3ai Milestone 2 Metric 3 | 04/26/2017 01:43 PM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type                   | File Name  | Description   | Upload Date         |
|--|---------|-----------------------------|--|---|---------------------|
|  | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES2_MM_BHNNY_3ai_Milestone_2_Metric_2_12926.pdf                                | BHNNY 3ai Milestone 2 Metric 2                              | 04/26/2017 01:42 PM |
|  | mcintyc | Policies/Procedures         | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES2_P&P_BHNNY_3ai_Milestone_2_Metric_1_12923.pdf                               | BHNNY 3ai Milestone 2 Metric 1                              | 04/26/2017 01:41 PM |
| Develop collaborative evidence-based standards of care including medication management and care engagement process.  | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES6_OTH_Milestone_6_Remediation_Narrative_15493.pdf                            | Milestone 6 Remediation Narrative                           | 06/19/2017 03:58 PM |
|  | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES6_OTH_BHNNY_Milestone_6_Remediation_15492.pdf                                | BHNNY Milestone 6 Remediation                               | 06/19/2017 03:58 PM |
|  | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES6_MM_BHNNY_3ai_Milestone_6_Metric_2_12942.pdf                                | BHNNY 3ai Milestone 6 Metric 2                              | 04/26/2017 01:52 PM |
|  | mcintyc | Policies/Procedures         | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES6_P&P_BHNNY_3ai_Milestone_6_Metric_1_12938.pdf                               | BHNNY 3ai Milestone 6 Metric 1                              | 04/26/2017 01:50 PM |
| Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement. | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_OTH_Milestone_10_Remediation_Narrative_15706.pdf                          | Milestone 10 Remediation Narrative                          | 06/20/2017 10:03 AM |
|  | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_OTH_3ai_Milestone_10_Remediation_15705.pdf                                | 3ai Milestone 10 Remediation                                | 06/20/2017 10:02 AM |
|  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_DOC_BHNNY_3ai_Milestone_10_Univ_of_Washington_AIMS_IMPACT_Model_12962.pdf | BHNNY 3ai Milestone 10 Univ of Washington AIMS IMPACT Model | 04/26/2017 02:02 PM |
|  | mcintyc | Policies/Procedures         | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_P&P_BHNNY_3ai_Milestone_10_Supporting_doc_for_partners_12961.pdf          | BHNNY 3ai Milestone 10 Supporting doc for partners          | 04/26/2017 02:01 PM |
|  | mcintyc | Policies/Procedures         | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_P&P_BHNNY_3ai_Milestone_10_Resources_for_Partners_12958.pdf               | BHNNY 3ai Milestone 10 Resources for Partners               | 04/26/2017 02:00 PM |
|  | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES10_MM_BHNNY_3ai_Milestone_10_Minutes_and_Agenda_12956.pdf                    | BHNNY 3ai Milestone 10 Minutes and Agenda                   | 04/26/2017 01:59 PM |
| Employ a trained Depression Care Manager meeting requirements of the IMPACT model.   | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES11_DOC_BHNNY_3ai_Milestone_11_12970.pdf                                      | BHNNY 3ai Milestone 11                                      | 04/26/2017 02:06 PM |
| Use EHRs or other technical platforms to track all patients engaged in this project.   | mcintyc | Templates                   | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES8_TEMPL_BHNNY_3ai_Milestone_8_metric_1_12953.pdf                             | BHNNY 3ai Milestone 8 metric 1                              | 04/26/2017 01:56 PM |
| Use EHRs or other technical platforms to track all patients engaged in this project.   | mcintyc | Templates                   | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES4_TEMPL_BHNNY_3ai_Milestone_4_12932.pdf                                      | BHNNY 3ai Milestone 4                                       | 04/26/2017 01:46 PM |
| Designate a Psychiatrist meeting requirements of the IMPACT Model.   | mcintyc | Templates                   | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES12_TEMPL_BHNNY_3ai_Milestone_12_12980.pdf                                    | BHNNY 3ai Milestone 12                                      | 04/26/2017 02:09 PM |
| Use EHRs or other technical platforms to track all patients engaged in this project.   | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES15_OTH_3ai_M15_Remediation_documentation_15326.pdf                           | 3ai M15 Remediation documentation                           | 06/19/2017 11:45 AM |
|  | mcintyc | Other                       | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES15_OTH_Remediation_Narrative_15325.pdf                                       | BHNNY 3ai M15 Remediation Narrative                         | 06/19/2017 11:45 AM |
|  | mcintyc | Screenshots                 | 1_DY2Q4_PROJ3ai_MDL3ai3_PRES15_SS_BHNNY_3  | BHNNY 3ai Milestone 15                                      | 04/26/2017 02:12 PM |



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**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name                 | Description | Upload Date |
|----------------|---------|-----------|---------------------------|-------------|-------------|
|                |         |           | ai_Milestone_15_12984.pdf |             |             |

**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text   |
|--|--|
| Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3. |  |
| Develop collaborative evidence-based standards of care including medication management and care engagement process.  | <p>Metric 1:<br/>To adopt evidence-based standards of care including medication management and a care engagement process, BHNNY developed a 4-step review process including regularly scheduled formal meetings. In Step 1, the BHNNY behavioral health team identified an initial need to address two behavioral health conditions in primary care: Depression and ADHD. These conditions were presented to PPS partners for review at the 12/05/2016 BHNNY PPS Provider Champions meeting, which consisted of primary care and behavioral health clinical champions and administrative personal. This group agreed to the focus on these conditions, and suggested conditions for future consideration. In Step 2, the BHNNY behavioral health team identified specific evidence-based guidelines for these conditions, and provided them to the BHNNY Primary Care Advisory Group for the next level of review. These partners commented favorably on the guidelines and offered recommendations for future consideration. In Step 3, the BHNNY PPS Behavioral Health Quality Improvement Sub-Committee, consisting of behavioral health and primary care clinicians and administrative leaders who are members of the Project 3.a.i and 3.a.ii sub-committees, reviewed and adopted three recommended evidence-based standards of care at their 01/27/2017 sub-committee meeting. In Step 4, the overseeing BHNNY PPS Clinical and Quality Affairs Committee formally adopted all three guidelines at their 2/15/2017 committee meeting.</p> <p>Metric 2:<br/>The following evidence-based care protocols were formally approved by the BHNNY PPS, and partners have adopted policies that address use of these guidelines.<br/>The MacArthur Foundation's Depression Management Tool Kit<br/>These guidelines were developed by The MacArthur Foundation Initiative on Depression and Primary Care to assist primary care clinicians recognize and manage depression. They address screening and diagnosis, patient education, treatment and monitoring compliance and response. They include specific guidance on medication management, and a section on patient engagement through the use of a comprehensive set of patient education materials.<br/>The Institute for Clinical System's Improvement Depression in Primary Care guideline<br/>These guidelines were developed by the ICSI, and address the diagnosis and treatment of depression in primary care. They address screening for/diagnosing depression, treatment, collaborative care, patient engagement, follow-up and monitoring, and use in special populations. Importantly, these standards of care specifically include sections on medication management and patient engagement.<br/>The American Academy of Pediatrics Clinical Practice Guideline for the Diagnosis, Evaluation, and Treatment of Attention-Deficit/ Hyperactivity Disorder in Children and Adolescents<br/>These guidelines were developed by the AAP for the diagnosis and treatment of ADHD. They address evaluation, diagnosis, conceptualization, and treatment. Importantly, the guidelines include specific recommendations for medication management by patient age.<br/>Finally, the BHNNY behavioral health project management staff drafted a policy template regarding the use of PPS-approved evidence-based standards of care. This template was provided to organizations participating in Model 1. These organizations adapted the policy template for their organization, and adopted the policies. These policies, adopted by Saratoga Hospital's Community Health Center and Columbia Memorial Hospital, describe the practice-level use of the PPS-approved evidence-based national guidelines, the source of the guidelines, and the details regarding the frequency of updates.</p> |
| 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.                        |  |





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| Milestone Name   | Narrative Text   |
|--|--|
| <p>Use EHRs or other technical platforms to track all patients engaged in this project.</p>                                | <p>Metric 1: EHR demonstrates integration of medical and behavioral health record within individual patient records.</p> <p>BHNNY behavioral health, primary care, and care management agency partners identify technology as a top priority concern. In order to provide quality, holistic patient care, an integrated electronic health record is essential. Integrated EHR records allow primary care physicians to address behavioral health conditions which results in better medication and treatment adherence leading to overall improved patient care.</p> <p>Several practices in BHNNY's PPS have integrated their primary care and behavioral health records including Koinonia Primary Care, utilizing eCW and Albany Medical Center Internal Medicine Group, utilizing All Scripts Touchworks. Koinonia is a small practice with 1.5 full time medical providers and 1 behavioral health provider who treat patients across the lifespan. In contrast, AMC IMG has multiple medical providers and full time behavioral health providers who serve the adult population. Despite their differing sizes and structure, both practices have successfully integrated their records and are using that integration to provide holistic patient care by utilizing a shared EHR to document both behavioral health and medical interventions.</p> <p>As required in Domain 1, screenshots have been provided from both practices demonstrating an integrated EHR.</p> <p>Metric 2: PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.</p> <p>BHNNY conducted a baseline comprehensive survey in September 2015 in order to understand the current status of data collection within partner EHR systems as well as any patient registries that organizations create on their own or report into from a population health perspective. Beginning in October of 2015, BHNNY began collecting patient engagement data from partnering organizations that have a POA and BAA in place. For each of the projects that BHNNY is participating in, patients that received the defined services, such as a PHQ9 in a primary care setting, were reported by secure means in a template registry form. This data included patient first name, last name, Medicaid/CIN, date of service, and NPI or organization reporting. Data is aggregated and de-duplicated on a quarterly basis and reported to DOH for quarterly reporting. Data registry enhancements became a contract deliverable in July of 2016 and each project requires additional data elements on a quarterly basis. Each patient registry contains Medicaid patient's first name, last name, CIN, Date of Service, NPI, and additional defining elements depending on the project.</p> <p>Project 3.a.i patient registry includes all Medicaid patients seen in the last quarter with an appropriate behavioral health screening such as, but not limited to, a PHQ2/9 in a primary care setting and a determined qualifying behavioral health diagnosis.</p> <p>The BHNNY patient registries and the accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure engagement across the projects and participating organizations continues. As BHNNY identifies a secure means to share data, population health registries will also help organizations target patients for project participation. The PPS is planning on implementing both a Care Coordination and analytics platform within the next six months to further enable data aggregation, risk stratification and care coordination services across the PPS.</p> |
| <p>Co-locate primary care services at behavioral health sites.</p>   |  |
| <p>Develop collaborative evidence-based standards of care including medication management and care engagement process.</p> | <p>Metric 1</p> <p>To develop consensus on evidence-based standards of care, BHNNY developed a collaborative 4-step review process including regularly scheduled formal meetings. In Step 1, the BHNNY clinical team identified the need to address specific conditions. In Step 2, BHNNY clinical team worked internally and with PPS partners to identify evidence-based standards of care for these conditions. In Step 3, the guidelines were presented to PPS clinical workgroups/sub-committees for review and adoption. In Step 4, they were taken to Clinical and Quality Affairs Committee (CQAC) for review and formal adoption.</p> <p>Evidence-based standards of care were reviewed and approved at the following regularly scheduled BHNNY meetings: Asthma management guidelines were reviewed/adopted by the Asthma Sub-committee on 5/13/2016 and the CQAC on 5/18/2016. Hypertension management guidelines were reviewed/adopted by the Cardiovascular Sub-committee on 7/01/2016 and the CQAC on 7/20/2016. Guidelines for management of blood cholesterol were reviewed/adopted by the Cardiovascular Sub-committee on 10/14/2016 and the CQAC on 12/20/2016. Blood pressure self-monitoring guidelines were reviewed by the Cardiovascular Sub-committee on 12/02/2016. Guidelines for the management of depression were reviewed/approved by the Behavioral Health Quality Improvement (BHQI) Sub-Committee on 1/27/2017</p>   |



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| Milestone Name  | Narrative Text   |
|---|--|
|   | <p>and the CQAC on 2/15/2017. ADHD management guidelines were reviewed/adopted by the BHQI Sub-Committee on 1/27/2017 and the CQAC on 02/15/2017.</p> <p>Metric 2</p> <p>The below evidence-based care protocols were approved by the BHNNY PPS. BHNNY staff drafted a policy template for the use of these evidence-based standards of care that address the source of the guidelines and details regarding frequency of updates. The template was given to Model 2 participants. Northern Rivers Family of Services adapted the policy template to their organization and adopted the policy.</p> <p>National Heart, Lung, and Blood Institute Guidelines for Diagnosis and Management of Asthma</p> <p>These guidelines address assessment and monitoring of asthma severity/control, patient education and engagement, environmental factors, comorbid conditions and medication management.</p> <p>Joint National Committee 8 2014 Evidence-Based Guideline for the Management of High Blood Pressure in Adults</p> <p>These guidelines address treatment thresholds, goals and medication management for hypertension.</p> <p>2013 American Association of Cardiovascular &amp; Pulmonary Rehabilitation/American Heart Association Guideline on the Treatment of Blood Cholesterol to reduce Atherosclerotic Cardiovascular Risk in Adults</p> <p>These guidelines address management of blood cholesterol with statin therapy, and identify 4 groups of individuals for whom research has demonstrated a reduction in ASCVD events from statin therapy.</p> <p>American Medical Association Self-Measured Blood Pressure Monitoring Program</p> <p>These program guidelines address engaging patients in self-measurement of blood pressure.</p> <p>MacArthur Foundation Depression Management ToolKit</p> <p>These guidelines address screening and diagnosis, patient education/engagement, treatment including medication management and monitoring.</p> <p>Institute for Clinical Systems Improvement Depression in Primary Care guideline</p> <p>These guidelines address screening/diagnosing depression, treatment including medication management, collaborative care, patient engagement, follow-up/monitoring.</p> <p>American Academy of Pediatrics Clinical Practice Guideline for the Diagnosis, Evaluation and Treatment of Attention-Deficit/ Hyperactivity Disorder in Children and Adolescents</p> <p>These guidelines address evaluation, diagnosis and treatment including medication management.</p> |
| <p>Conduct preventive care screenings, including physical and behavioral health screenings.</p> |  |
| <p>Use EHRs or other technical platforms to track all patients engaged in this project.</p>     | <p>Metric 1: EHR demonstrates integration of medical and behavioral health record within individual patient records.</p> <p>BHNNY behavioral health, primary care, and care management agency partners identify technology as a top priority concern. In order to provide quality, holistic patient care, an integrated electronic health record is essential. Integrated EHR records allow primary care physicians to address behavioral health conditions which results in better medication and treatment adherence leading to overall improved patient care.</p> <p>Northern Rivers, an agency dedicated to providing behavioral health, foster care, and coordinated care solutions to the community, has a thriving crisis program, several behavioral health centers as well as providing school-based care. Recognizing the need for integration, a medical provider was contracted to provide primary care services at one of the organization's behavioral health locations. As indicated in the screenshot provided, the medical and behavioral health directors have integrated their records in their current system and are upgrading to a more user friendly system in early 2017. Providing medical care on site in addition to their robust behavioral health services allows Northern Rivers to provide complete holistic care to their patients and improve health outcomes.</p> <p>Metric 2: PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.</p> <p>BHNNY conducted a baseline comprehensive survey in September 2015 in order to understand the current status of data collection within partner EHR systems as well as</p>  |



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| Milestone Name   | Narrative Text  |
|--|---|
|  | <p>any patient registries that organizations create on their own or report into from a population health perspective. Beginning in October of 2015, BHNNY began collecting patient engagement data from partnering organizations that have a POA and BAA in place. For each of the projects that BHNNY is participating in, patients that received the defined services, such as a PHQ9 in a primary care setting, were reported by secure means in a template registry form. This data included patient first name, last name, Medicaid/CIN, date of service, and NPI or organization reporting. Data is aggregated and de-duplicated on a quarterly basis and reported to DOH for quarterly reporting. Data registry enhancements became a contract deliverable in July of 2016 and each project requires additional data elements on a quarterly basis. Each patient registry contains Medicaid patient's first name, last name, CIN, Date of Service, NPI, and additional defining elements depending on the project.</p> <p>Project 3.a.i patient registry includes all Medicaid patients seen in the last quarter with an appropriate preventive screening in a behavioral health setting and associated behavioral health diagnosis. Add actual screenings being done at Northern Rivers. Patients on this registry will have had at least one of the following: comprehensive physical exam, blood pressure recorded, Body Mass Index assessment with appropriate counseling, tobacco screening or cancer screening.</p> <p>The BHNNY patient registries and the accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure engagement across the projects and participating organizations continues. As BHNNY identifies a secure means to share data, population health registries will also help organizations target patients for project participation. The PPS is planning on implementing both a Care Coordination and analytics platform within the next six months to further enable data aggregation, risk stratification and care coordination services across the PPS.</p>   |
| Implement IMPACT Model at Primary Care Sites.  |   |
| Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement. | <p>Metric 1:</p> <p>Through a 4-step collaborative process, BHNNY adopted the University of Washington's Advancing Integrated Mental Health Solutions (AIMS) Center's IMPACT model collaborative care standards and protocols for use by the 3.a.i Model 3 participants. First, the BHNNY behavioral health team worked with PPS providers to develop an inventory of AIMS Center resources containing IMPACT model standards. Second, on 02/24/2017, the BHNNY PPS Behavioral Health Quality Improvement Sub-committee reviewed and adopted the AIMS Center's IMPACT Model resources and standards for the BHNNY participating partners. Third, on 03/15/2017 the BHNNY Clinical and Quality Affairs Committee approved the AIMS Center IMPACT Model Collaborative Care resources and standards as the source of Model 3 guidelines and processes. Fourth, the BHNNY project management staff drafted a policy template for the use of these resources and standards for practice-level IMPACT Model policies and procedures. This template was provided to participating partners, who adapted the it for their organization, and adopted the policy. These policies and protocols regarding the IMPACT model standards were adopted by Saratoga Hospital and Columbia Memorial Hospital, and describe the use of the AIMS Center IMPACT Model Collaborative Care resources, source of the guidelines, and details regarding the frequency of updates.</p> <p>As shown on the IMPACT Model Resource Sheet, the resources include the IMPACT Model standards for medication management, including "Brief Psychotropic Medication Prescribing Guidelines."</p> <p>The approved resources also include standards for care engagement. This is addressed directly in the DCM job description, which details how the DCM engages patients through screening and assessing, facilitating patient engagement and follow-up care, providing patient education, tracking treatment response with regular patient contact, and providing brief behavioral interventions that involve a patient engagement component.</p> <p>The approved resources also include the standards for collaboration between the PCP and the DCM. This is addressed in the AIMS Center resource for Team Structure, which illustrates the relationship between the PCP and DCM, and sections that highlight the role of, and interaction between, the PCP and DCM.</p> <p>PPS partners developed policies and protocols based on IMPACT standards that address collaboration between the PCP and DCM. Saratoga Hospital's Behavioral Health Specialist Referral Policy, Depression Care Manager Job Description, and process workflow each detail collaboration between the PCP and DCM. Columbia Memorial Hospital's "Follow-up Care Impact Model" policy delineates their processes of patient care engagement and collaboration between PCPs and DCMs.</p> <p>Metric 2: Policies and procedures include process for consulting with Psychiatrist</p> <p>The approved and attached resources also include the IMPACT standards for consulting with a psychiatrist. This is addressed directly in the Psychiatric Consultation Description AIMS center document titled "Psychiatric Consultant, Sample Job Description, Typical Workload, &amp; Resource Requirements" and two Collaborative Care Consultation Psychiatry training modules.</p> <p>PPS partners have developed policies/processes based on IMPACT standards that specifically address psychiatric consultation. Saratoga Hospital's Behavioral Health</p> |



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| Milestone Name  | Narrative Text  |
|---|---|
|   | <p>Specialist Referral Policy includes a process for psychiatric consulting. Columbia Memorial Hospital's Psychiatric Consultation and Collaboration Impact Model Policy delineates their process for psychiatric consultation.</p>   |
| <p>Employ a trained Depression Care Manager meeting requirements of the IMPACT model.</p> | <p>Metric 1: PPS Identifies qualified Depression Care Manager as identified in Electronic Health Records.</p> <ul style="list-style-type: none"> <li>Supporting documentation: Screenshot of DCM in Saratoga Community Health Center EHR</li> </ul> <p>Metric 2: Depression Care Manager meets requirements of IMPACT model, including coaching patients in behavioral activation, offering course in counseling, monitoring depression symptoms for treatment response, and completing a relapse prevention plan.</p> <p>Better Health for Northeast New York (BHNNY) partner Saratoga Community Health Center (SCHC) began implementation of the IMPACT model in the mid-2016. SCHC developed the Depression Care Manager job description based on the template available on the University of Washington IMPACT Model resource center. SCHC prioritized trainings for this position based on the following position requirements.</p> <ul style="list-style-type: none"> <li>Systematically track treatment responses and monitor patients for changes in clinical symptoms and treatment side effects or complications.</li> <li>Provide brief behavioral interventions using evidence-based techniques such as behavioral activation, problem-solving treatment, motivational interviewing, or other treatments as appropriate.</li> <li>Facilitate treatment plan changes for patients who are not improving as expected in consultation with the medical provider and psychiatric consultant and who may need more intensive or more specialized mental health care.</li> </ul> <p>SCHC identified and submitted recommended list of trainings from the AIMS website to the BHNNY project management office from which BHNNY created an AIMS IMPACT Resource Sheet. This document was reviewed and approved by the BHNNY Behavioral Health Quality Improvement Committee on February 24 and subsequently approved by the Clinical and Quality Affairs Committee on March 15, 2017 for use by PPS partners implementing Model 3.</p> <p>The DCM job description was approved by SCHC's human resources department and an individual was hired. To ensure the DCM fully met the requirements of the IMPACT model, in addition to the trainings on the AIMS website, SCHC sent staff to a 2-day conference organized by the AIMS Center New York State Collaborative Care Learning Network. This conference encompassed identifying and engaging patients, establishing a diagnosis, initiating treatment, follow up care, treat to target and completing treatment and relapse prevention.</p> <p>SCHC provides patients with an educational pamphlet identifying their collaborative care team with a description of their role on the team as indicated in the Domain 1 documentation requirement for Metric 2.</p> <p>As part of implementation the SCHC clinical team met with their IT department to add essential elements of the IMPACT model into their Electronic Health Record. The DCM is identified in IMPACT patient records as required by Metric 1.</p> |
| <p>Designate a Psychiatrist meeting requirements of the IMPACT Model.</p>                 | <p>Better Health for Northeast New York (BHNNY) partner Saratoga Community Health Center (SCHC) implemented the IMPACT model in mid-2016 to better address their patients' behavioral health conditions. The program, led by an experience family physician and supported by on-site part-time psychiatrist and a trained Depression Care Manager, has resulted in improved medication and treatment adherence leading to overall improved patient care.</p> <p>As required by the IMPACT Model, SCHC designated a psychiatrist as part of the collaborative care team. The psychiatrist is identified in SCHC's Electronic Health Record as required by the metric.</p> <p>The psychiatrist completed recommended trainings identified by SCHC and approved by BHNNY Behavioral Health Quality Improvement Committee on February 24 and Clinical and Quality Affairs Committee on March 15, 2017. These trainings are indicated on the BHNNY AIMS Center Resource Page provided as additional supporting</p>   |



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| Milestone Name   | Narrative Text  |
|--|---|
|  | <p>documentation.</p> <p>The psychiatrist, working with the other members of the collaborative care team and Saratoga Hospital administration, helped to create a work flow and procedure to ensure IMPACT patients receive timely and appropriate follow up care. This process is indicated in the supporting documentation: SCHC Behavioral Health Follow-Up policy and SCHC IMPACT Work Flow.</p> <p>Patients' PHQ9 scores are assessed and referred to the depression care manager via a warm hand off as appropriate. The depression care manager consults with the psychiatrist regarding new patients, those whose PHQ9 score increases by two points or more, or if the score drops 50% within an eight to twelve week period. After consulting with the psychiatrist for next steps, the depression care manager follows up with the patient via telephone or office visit. The psychiatrist and depression care manager meet on a regular basis to remain up to date on the patient's status.</p> <p>The SCHC IT staff, referencing documents from the University of Washington AIMS Website on IMPACT registry requirements, created a registry to track IMPACT patients in their EHR. This registry has been provided as required documentation indicated in Domain 1 Milestone 3. It tracks all patients receiving treatment in the IMPACT model, designates their psychiatrist, and tracks their PHQ9 score over time. This is a vital tool for delivering quality collaborative patient care and remaining up to date on patients' statuses.</p>   |
| Measure outcomes as required in the IMPACT Model.                                    |   |
| Provide "stepped care" as required by the IMPACT Model.                              |   |
| Use EHRs or other technical platforms to track all patients engaged in this project. | <p>Metric 1: EHR demonstrates integration of medical and behavioral health record within individual patient records.<br/>Metric 2: PPS identifies targeted patients and is able to track actively engaged patients for project. milestone reporting.</p> <p>BHNNY behavioral health, primary care, and care management agency partners identify technology as a top priority concern. In order to provide quality, holistic patient care, an integrated electronic health record is essential. Integrated EHR records allow primary care physicians to address behavioral health conditions which results in better medication and treatment adherence leading to overall improved patient care.</p> <p>Communication between the primary care provider, depression care manager, and psychiatrist is essential for the success of the IMPACT Model. An integrated EHR record is the foundation of the communication between providers to implement a patient-centered team approach. As indicated in the screenshot provided from Saratoga Community Health Center, the organization utilizes Medent as their EHR. They have successfully integrated behavioral health and medical records within the same EHR. Patients' medical and behavioral health records are visible to both providers and staff involved in patient care as they utilize the same EHR. The collaborative care team, comprised of the depression care manager, psychiatrist and primary care provider, are able actively track and view each patient's behavioral and medical interventions in the shared EHR. This integration allows providers to be accountable for patient treatments, provide holistic, patient-centered care, and sets the groundwork for implementation of the five principles of collaborative care.</p> <p>In addition to the integrated health record, the IMPACT model requires the use of a patient registry. This registry is key to tracking the patients from a population health perspective. The registry, submitted as part of the supporting documentation required for Domain 1, tracks the patient, their assigned psychiatrist, and their PHQ9 scores. This registry allows the depression care manager and the rest of the collaborative care team to track changes in the scores and conduct outreach as appropriate. SCHC's IT team has incorporated this registry into the EHR which allows all providers involved in the patients care to access the information. In addition, the DCM can use the registry to track all patients and consult with the psychiatrist as needed, a core component of the IMPACT model which translates to successful health outcomes.</p> <p>As other partners begin to implement the IMPACT model, the PPS will utilize SCHC as a resource for best practice.</p> |



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**Milestone Review Status**

| <b>Milestone #</b> | <b>Review Status</b> | <b>IA Formal Comments</b> |
|--------------------|----------------------|---------------------------|
| Milestone #1       | Pass & Ongoing       |                           |
| Milestone #2       | Pass & Complete      |                           |
| Milestone #3       | Pass & Ongoing       |                           |
| Milestone #4       | Pass & Complete      |                           |
| Milestone #5       | Pass & Ongoing       |                           |
| Milestone #6       | Pass & Complete      |                           |
| Milestone #7       | Pass & Ongoing       |                           |
| Milestone #8       | Pass & Complete      |                           |
| Milestone #9       | Pass & Ongoing       |                           |
| Milestone #10      | Pass & Complete      |                           |
| Milestone #11      | Pass & Complete      |                           |
| Milestone #12      | Pass & Complete      |                           |
| Milestone #13      | Pass & Ongoing       |                           |
| Milestone #14      | Pass & Ongoing       |                           |
| Milestone #15      | Pass & Complete      |                           |



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**✔ IPQR Module 3.a.i.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**IPQR Module 3.a.i.5 - IA Monitoring**

**Instructions :**





**New York State Department Of Health  
Delivery System Reform Incentive Payment Project  
DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Project 3.a.ii – Behavioral health community crisis stabilization services**

**✔ IPQR Module 3.a.ii.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Lack of capital funding to expand physical capacity to observe patients for up to 48 hours will put this project at risk. Without funding to build, construct, or repurpose licensed beds, it will be a challenge for participating providers to be successful. Additional risks include funding for additional staff to observe patients in crisis for up to 48 hours, as well as the readiness of MCOs to reimburse for services provided. Implementation of a collaboratively developed VBP agreement, as well as a process for funds flow will help to mitigate these risks across the PPS and will ensure that funding will be provided for all crisis intervention program services.

The success of this project will depend largely on participating provider, hospital, first responder and community buy-in. Development of best practice protocols, diversion strategies, and the willingness of community EDs to engage is essential. This same challenge will exist with mobile crisis units, community agencies, and local police units who may feel it would be "safer" to send a patient to the ED. Establishing a behavioral health sub-committee with leadership from each participating agency, as well as providing education and training will help mitigate these risks. The CQAC will work with hospital and crisis programs to develop the protocols for diversion and identify the resources they will need. Communication and education will be available for first responders and community agencies on the benefits of the diversion protocol, as well as how to utilize these services.

Staffing, training and timely resources are crucial. Willingness to participate in shared decision-making among medical professionals and substance abuse treatment providers may also provide challenges. The workforce training vendor will provide appropriate training in an effort to ensure that all staff are comfortable with any additional responsibilities. The CQAC will ensure processes and procedures are in place for system integration among performing providers. This committee will work closely with providers to ensure they are adequately prepared and are aware of resources available to them.

The availability of timely and appropriate community resources for referrals will be imperative to the success of this project. Formal access and responsiveness agreements will be created with community based providers, and tele-health services will be available when immediate community resources are unavailable. AMCH PMO will work collaboratively with two local NP schools, one PA school, one social work school, and two psychiatric program schools, and will encourage their support.

IT challenges exist within this project. Success will be dependent on HIXNY's readiness for behavioral health consents and standardization within HIXNY across our network. Implementation of cross-PPS EHR capabilities, including excel transfer in lieu of MAPP functionality will help to bridge the IT gap in the short term. As the DSRIP year progresses, we will have better access through care coordination, direct messaging, and additional data through the MAPP tool and SHIN-NY. This plan will be largely based on functionality of the MAPP tool and the availability of data through Salient and other data sources provided by the state.



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**✓ IPQR Module 3.a.ii.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY3,Q4                 | 7,531                  |

|              | Year,Quarter             | DY2,Q1  | DY2,Q2  | DY2,Q3  | DY2,Q4  |
|--------------|--------------------------|---------|---------|---------|---------|
| PPS Reported | Baseline Commitment      | 2,081   | 2,277   | 3,021   | 3,766   |
|              | Quarterly Update         | 2,524   | 3,385   | 3,385   | 5,135   |
|              | Percent(%) of Commitment | 121.29% | 148.66% | 112.05% | 136.35% |
| IA Approved  | Quarterly Update         | 0       | 2,119   | 0       | 450     |
|              | Percent(%) of Commitment | 0.00%   | 93.06%  | 0.00%   | 11.95%  |

**Current File Uploads**

| User ID  | File Type | File Name  | File Description                      | Upload Date         |
|----------|-----------|--|---------------------------------------|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ3aai_MDL3aai2_PES_TRAIN_AMCH_PPS_3_A_II_FINAL_FOR_MAPP_UPLOAD_13960.xlsx | AMCH PPS_3_A_II FINAL FOR MAPP UPLOAD | 04/27/2017 03:50 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments  |
|---------------|---|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4. |



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**✔ IPQR Module 3.a.ii.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements<br>(Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.   | DY3 Q2              | Project         | N/A           | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has established a crisis intervention program that includes outreach, mobile crisis, and intensive crisis services.  |                     | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Establish an ad-hoc Behavioral Health (BH) Community Crisis Stabilization (BHCCS) workgroup under the auspices of BH sub-committee to oversee the development/enhancement of regionally-based behavioral health community crisis stabilization programs that include outreach, mobile crisis, and intensive crisis services.   |                     | Project         |               | In Progress | 10/19/2015          | 09/30/2017        | 10/19/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. The ad-hoc workgroup will be the lead author of the community crisis stabilization plan. The plan will be reviewed and approved by the CQAC.   |                     | Project         |               | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. Ensure participation of a broad spectrum of stakeholders in the planning process for crisis services in the community by engaging the CCAC, WCC, and CCHLC.  |                     | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:4. Utilizing the CNA, assess the adequacy of the current community-based services available across the PPS region, including timely community crisis intervention for consumers in behavioral health crisis.  |                     | Project         |               | Completed   | 11/09/2015          | 12/31/2015        | 11/09/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Establish agreements with at least one hospital with specialty inpatient psychiatric services, one hospital with specialty detoxification services, key PPS hospital emergency departments, key PPS health home providers, key PPS outpatient mental health providers, key PPS outpatient substance use providers, and key PPS ambulatory detox providers (if available), to coordinate and provide services as defined by the |                     | Project         |               | In Progress | 10/05/2015          | 09/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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|---|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| crisis intervention plan.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:6. Ensure that participating organizational contracts specify access and responsiveness standards, information sharing standards, care coordination protocols, designated leads for each organization for clinical collaboration, staff training topics and frequency.  |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:7. Execute contracts only to participating organizations that are licensed or designated by OMH/OASAS to provide specific crisis services described in the New York State Medicaid state plan or Home and Community-Based Services benefit package.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:8. Establish agreements for Psychiatric and Addiction Medicine consultation services to the crisis team that include specific response times consistent with New York State and local regulatory body guidance.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Identify and implement evidence-based tools, such as Zero Suicide Toolkit to assess risk and stabilize patients in crisis.   |                     | Project         |               | In Progress | 04/11/2016          | 09/30/2017        | 04/11/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:10. Hire peer and recovery specialists with defined job functions that include responsibilities such as, handoff to a warm line for callers who primarily present to crisis team with need for talk support.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:11. In collaboration with the CCHLC and WCC, implement staff training program to train staff on: suicide risk assessment and interventions, safety planning, crisis stabilization and de-escalation techniques, motivational interviewing, working with police, working with peers, mental health first aid or other first-responder interventions, cultural competency, health literacy, and community resources availability. |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:12. Collaborate with one local police department to evaluate the feasibility of starting programs like the Memphis Crisis Intervention Team (CIT) program.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #2</b><br>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.  | DY3 Q2              | Project         | N/A           | In Progress | 05/09/2016          | 09/30/2017        | 05/09/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status      | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>PPS has implemented diversion management protocol with PPS Hospitals (specifically Emergency Departments).  |                     | Project         |               | In Progress | 05/09/2016          | 09/30/2017        | 05/09/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. BH subcommittee/ED Triage sub-committees will review current community and hospital protocols for diversion of patients with behavioral health crisis from emergency room and inpatient services, as appropriate. |                     | Project         |               | In Progress | 05/09/2016          | 09/30/2017        | 05/09/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. BH sub-committee/ED Triage committee will research successful evidence-based programs for diversion management.   |                     | Project         |               | In Progress | 05/09/2016          | 09/30/2017        | 05/09/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. BH sub-committee/ED Triage committee will draft updates to protocols, if necessary, for approval by CQAC.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Educate, train and provide resources, as needed, for successful implementation of diversion management protocol by sub-committee and PMO.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Develop and implement regional diversion management protocols with PPS emergency departments under the direction of the CQAC.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Survey stakeholders and additional service users for regular feedback and potential opportunities for improvement.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:7. Monitor sustainability and outcomes of implemented diversion management protocol by PMO.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #3</b><br>Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.   | DY3 Q2              | Project         | N/A           | In Progress | 11/05/2015          | 09/30/2017        | 11/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has engaged MCO in negotiating coverage of services under this project and/or MCO provides coverage for services in project.  |                     | Project         |               | In Progress | 11/05/2015          | 09/30/2017        | 11/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to evaluate current contractual arrangements with payers for possible amendments.  |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b>  |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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|--|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:2. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to develop a framework that can be applied across the regional provider network   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. AMCH PMO will work with Medicaid MCOs to implement a roadmap following appropriate Federal and State laws, regulations and guidelines.  |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:4. AMCH PMO will work with its provider network to provide technical support and assistance to amend existing fee-for-service contracts.   |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:5. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to negotiate required contracts with MCOs.   |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:6. AMCH PMO, in collaboration with AMCH Integrated Delivery Systems Department, will discuss utilization trends, performance issues, and payment reform during monthly meetings with managed care organizations. |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:7. AMCH PMO will engage Medicaid MCOs in broader areas of concern to the PPS including financial sustainability, risk sharing, and compliance with competitive behaviors   |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:8. AMCH PPS will execute negotiated contracts with MCOs to implement required elements of the CMS approved VBP roadmap.  |                     | Project         |               | In Progress | 04/29/2016          | 09/30/2017        | 04/29/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Milestone #4</b><br>Develop written treatment protocols with consensus from participating providers and facilities.   | DY2 Q4              | Project         | N/A           | Completed   | 05/09/2016          | 03/31/2017        | 05/09/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Regularly scheduled formal meetings are held to develop consensus on treatment protocols.   |                     | Project         |               | Completed   | 05/09/2016          | 03/31/2017        | 05/09/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Coordinated treatment care protocols are in place.  |                     | Project         |               | Completed   | 05/09/2016          | 03/31/2017        | 05/09/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M1:1. Convene a group of expert clinicians and specialists from participating organizations and establish regular meeting schedule to develop consensus on draft treatment protocols.                               |                     | Project         |               | Completed   | 05/09/2016          | 03/31/2017        | 05/09/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b>  |                     | Project         |               | Completed   | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type              | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|----------------------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:2. Assess participating providers current treatment protocols and guidelines for review by the PPS expert panel.  |                     |                 |                            |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Finalize draft treatment protocols developed with consensus from participating practitioners.   |                     | Project         |                            | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:1. CQAC will review and approve the draft treatment protocols.   |                     | Project         |                            | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:2. Establish transition of care protocol, which includes personal contact by crisis team member during transition in care within one week post-transition.   |                     | Project         |                            | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. Develop protocols to assure timely documentation, including same day documentation, but no later than 48 hours after the event.   |                     | Project         |                            | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:4. Develop and implement ongoing training materials for all appropriate staff to keep them current on policies, procedures and treatment protocols.  |                     | Project         |                            | Completed | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:5. Monitor outcomes of developed protocols, with updates made as needed with approval by CQAC.   |                     | Project         |                            | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #5</b><br>Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.            | DY2 Q4              | Project         | N/A                        | Completed | 10/26/2015          | 03/31/2017        | 10/26/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS includes at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services in provider network   |                     | Project         |                            | Completed | 10/26/2015          | 03/31/2017        | 10/26/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS evaluates access to psychiatric services (in terms of community needs assessment, geographic access, wait times, and other measures), identifies improvement areas, and implements improvement steps. |                     | Provider        | <u>Safety Net Hospital</u> | Completed | 10/26/2015          | 03/31/2017        | 10/26/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Providers Associated with Completion:</b>   |                     |                 |                            |           |                     |                   |            |            |                  |                                  |
| Albany Medical Ctr Hospital; Columbia Memorial Hospital  |                     |                 |                            |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. Establish agreements with at least one hospital with  |                     | Project         |                            | Completed | 11/09/2015          | 12/31/2015        | 11/09/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |



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|--|---------------------|-----------------|--------------------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| specialty inpatient psychiatric services and crisis-oriented psychiatric services.   |                     |                 |                          |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Establish agreements with at least one hospital with specialty detoxification services.   |                     | Project         |                          | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Establish agreements with key PPS hospital emergency departments, key PPS health homes providers, key PPS outpatient mental health and substance abuse providers.   |                     | Project         |                          | Completed   | 11/09/2015          | 12/31/2015        | 11/09/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:1. Based on the Community Needs Assessments (CNA), service wait time reports, and hot-spot maps, evaluate access to PPS-wide psychiatric services, and identify improvement areas.   |                     | Project         |                          | Completed   | 10/26/2015          | 12/31/2015        | 10/26/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Identify areas of high need for pilot locations to potentially implement improvement steps in terms of access.  |                     | Project         |                          | Completed   | 06/13/2016          | 03/31/2017        | 06/13/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>M2:3. With approval of successful pilot, roll out improvement steps, working in collaboration with PPSs partners, to improve access.  |                     | Project         |                          | Completed   | 04/01/2015          | 03/31/2020        | 01/01/2017 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Milestone #6</b><br>Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).   | DY3 Q2              | Project         | N/A                      | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS includes hospitals with observation unit or off campus crisis residence locations for crisis monitoring.  |                     | Project         |                          | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS evaluates access to observation unit or off campus crisis residence services (in terms of community needs assessment, geographic access, wait times, and other measures), identifies improvement areas, and implements improvement steps. |                     | Provider        | Safety Net Hospital      | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS evaluates access to observation unit or off campus crisis residence services (in terms of community needs assessment, geographic access, wait times, and other measures), identifies improvement areas, and implements improvement steps. |                     | Provider        | Safety Net Clinic        | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS evaluates access to observation unit or off campus crisis residence services (in terms of community needs assessment, geographic access, wait times, and other measures), identifies improvement areas, and implements improvement steps. |                     | Provider        | Safety Net Mental Health | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |





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| improvement areas, and implements improvement steps.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. Establish participation agreements with hospitals with observation units or off campus crisis residence locations for crisis monitoring.   |                     | Project         |               | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:1. Based on the information from Community Needs Assessments (CNA), evaluate access to PPS-wide crisis observation units or off campus crisis residence services, and identify gaps in available services.  |                     | Project         |               | In Progress | 06/13/2016          | 09/30/2017        | 06/13/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:2. Develop a comprehensive access assessment, including access plans for psychiatric and crisis-oriented services, access improvement plans, and access reports based on geography and wait times.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Based on access assessment, identify PPS resources available to close gaps and improve access, reduce wait times and facilitate after-hours care.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Working in collaboration with PPS partners, implement improvement steps to improve access.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #7</b><br>Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.   | DY3 Q2              | Project         | N/A           | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS includes mobile crisis teams to help meet crisis stabilization needs of the community.   |                     | Project         |               | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Coordinated evidence-based care protocols for mobile crisis teams are in place.  |                     | Project         |               | In Progress | 11/09/2015          | 09/30/2017        | 11/09/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Establish agreements with regional mobile crisis teams to help meet crisis stabilization needs of the community  |                     | Project         |               | Completed   | 11/09/2015          | 12/31/2015        | 11/09/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:1. BH sub-committee to review current protocols for mobile crisis team, including ability to screen, provide crisis intervention and supportive counseling services, and to provide information, referrals and linkages to appropriate CBOs for on going treatment. |                     | Project         |               | In Progress | 06/13/2016          | 09/30/2017        | 06/13/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| <b>Task</b><br>M2:2. BH sub-committee to recommend updates to current protocols, as necessary, based on evidence-based protocols and guidelines.   |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Collaborate with community mobile crisis providers to implement regional protocols as necessary.  |                     | Project         |   | In Progress | 06/13/2016          | 09/30/2017        | 06/13/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:4. Provide support, training, education and resources as needed.   |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:5. Monitor success of developed protocols, updates made as needed with approval by CQAC.   |                     | Project         |   | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #8</b><br>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. | DY3 Q2              | Project         | N/A   | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR demonstrates integration of medical and behavioral health record within individual patient records.   |                     | Project         |   | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Practitioner - Primary Care Provider (PCP)     | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Practitioner - Non-Primary Care Provider (PCP) | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Hospital                                       | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.  |                     | Provider        | Safety Net Mental Health                                  | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>Alerts and secure messaging functionality are used to facilitate crisis intervention services.  |                     | Project         |   | In Progress | 06/01/2015          | 03/31/2018        | 06/01/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1. In collaboration with TDMC, assess current capabilities of EHR systems across the participating provider organizations to   |                     | Project         |   | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| determine their ability to integrate medical and behavioral health records within individual patient records.  |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Task</b><br>M1:2. Collaborate with EHR vendors and participating providers to outline functionality for integrated medical records within their current systems and incentivize providers to adopt these functions.   |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M1:3. Completion/confirmation of an integrated health record at each participating organization.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M2:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee. |                                | Project                    |                      | Completed     | 10/05/2015                     | 11/30/2015                   | 10/05/2015        | 11/30/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M2:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.   |                                | Project                    |                      | Completed     | 10/05/2015                     | 11/30/2015                   | 10/05/2015        | 11/30/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M2:3. Work with participating providers not currently using EHRs, to incentivize EHR adoption for patient care management.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M2:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.   |                                | Project                    |                      | Completed     | 10/01/2015                     | 12/31/2015                   | 10/01/2015        | 12/31/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M2:5. Utilizing the IT-TOM pilot experience, design the PPS-wide future state connectivity model.   |                                | Project                    |                      | Completed     | 06/01/2015                     | 03/31/2016                   | 06/01/2015        | 03/31/2016      | 03/31/2016                  | DY1 Q4  |
| <b>Task</b><br>M2:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.   |                                | Project                    |                      | In Progress   | 02/12/2016                     | 03/31/2018                   | 02/12/2016        | 03/31/2018      | 03/31/2018                  | DY3 Q4  |
| <b>Task</b><br>M2:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely  |                                | Project                    |                      | In Progress   | 10/01/2015                     | 03/31/2018                   | 10/01/2015        | 03/31/2018      | 03/31/2018                  | DY3 Q4  |



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| care management decisions.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M3:1. Perform a current state assessment on the interconnected systems' ability to send, receive and use alerts and secure messages to facilitate crisis intervention services.                                     |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M3:2. Conduct a gap analysis between current state and future state of using alerts and secure messaging functionalities for timely care coordination.  |                     | Project         |               | In Progress | 02/12/2016          | 03/31/2018        | 02/12/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M3:3. Implement training and secure messaging to support the use of alerts across the PPS.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Implement necessary technical and operational system changes needed to support the achievement of future state for use of alerts and secure messaging.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #9</b><br>Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.  | DY3 Q2              | Project         | N/A           | In Progress | 09/30/2017          | 09/30/2017        | 09/30/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has implemented central triage service among psychiatrists and behavioral health providers.   |                     | Project         |               | In Progress | 09/30/2017          | 09/30/2017        | 09/30/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Assess current policies, procedures and resources related to triage services among participating behavioral health providers.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:2. Working with Psychiatrists and other Behavioral Health Providers, develop agreements for participating providers to establish/expand central triage services.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Finalize contracts with participating providers to be in agreement with policies, procedures and protocols after approval by CQAC.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Develop or update current protocols, if necessary, to augment central triage services to include:<br>• Access to Peer Warm-Lines<br>• Decision-making tool that leads to clinically appropriate interventions |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| • Ability to deploy staff rapidly  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Develop work plans for outreach, education and training regarding triage protocol and value of triage and diversion for:<br>• Psychiatrists & Behavioral health providers<br>• Law enforcement departments<br>• Emergency responders, including police and EMT<br>• Community shelters<br>• Schools and universities<br>• Nursing homes and other residential centers<br>• Primary care providers<br>• Consumer and advocacy groups |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Monitor success of triage service as well as sustainability by PMO.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #10</b><br>Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.   | DY2 Q4              | Project         | N/A           | Completed | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS has created an active quality subcommittee that reports to PPS quality committee that is representative of medical and behavioral health staff and is specifically focused on integration of primary care and behavioral health services within practice sites and other behavioral health project initiatives. Note: Only one quality sub-committee is required for medical and behavioral health integration projects in Domain 3a. |                     | Project         |               | Completed | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>Quality committee identifies opportunities for quality improvement and use of rapid cycle improvement methodologies, develops implementation plans, and evaluates results of quality improvement initiatives.   |                     | Project         |               | Completed | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS evaluates and creates action plans based on key quality metrics, to include applicable metrics listed in Attachment J Domain 3 Behavioral Health Metrics.   |                     | Project         |               | Completed | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>PPS quality subcommittee conducts and/or reviews self-audits to ensure compliance with processes and procedures developed for this project.   |                     | Project         |               | Completed | 10/19/2015          | 03/31/2017        | 10/19/2015 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| <b>Task</b><br>Service and quality outcome measures are reported to all stakeholders including PPS quality committee.  |                                | Project                    |                      | Completed     | 10/19/2015                     | 03/31/2017                   | 10/19/2015        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M1:1. Establish a Behavioral Health (BH) sub-committee under the auspices of the Clinical and Quality Affairs (CQA) Committee.  |                                | Project                    |                      | Completed     | 10/19/2015                     | 12/31/2015                   | 10/19/2015        | 12/31/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:2. Assure representation from key medical and behavioral health practitioners participating in behavioral health related projects.   |                                | Project                    |                      | Completed     | 10/19/2015                     | 12/31/2015                   | 10/19/2015        | 12/31/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:3. CQAC will develop the charge for the BH sub-committee to oversee the effective implementation of goals and objectives of the BH projects.   |                                | Project                    |                      | Completed     | 10/19/2015                     | 12/31/2015                   | 10/19/2015        | 12/31/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M2:1. BH sub-committee will define the desired future state for each BH project, incorporating many perspectives including patient populations, practitioners, PPS partners and others.   |                                | Project                    |                      | Completed     | 05/09/2016                     | 03/31/2017                   | 05/09/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M2:2. BH sub-committee will assist in the development of a plan to identify quality improvement opportunities and related operational changes at clinical sites for the successful implementation of elements of project plans.   |                                | Project                    |                      | Completed     | 04/01/2015                     | 03/31/2020                   | 01/01/2017        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M2:3. Sub-committee will document quality improvement activities including: data collection, data analysis, identification and implementation of improvement activities using the PDSA methodology.   |                                | Project                    |                      | Completed     | 04/01/2015                     | 03/31/2020                   | 01/01/2017        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M2:4. Monitor outcomes of developed plan, updates made as needed with approval by CQAC.   |                                | Project                    |                      | Completed     | 04/01/2015                     | 03/31/2020                   | 01/01/2017        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M3:1. BH sub-committee will review all applicable BH metrics, including available baseline data.  |                                | Project                    |                      | Completed     | 05/09/2016                     | 03/31/2017                   | 05/09/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M3:2. Sub-committee will assist in prioritizing the key quality metrics and the development of action plans to identify causative factors of outcomes, develop improvement strategies, support metric evaluation and facilitate milestone reporting for their respective projects over the duration of DSRIP. |                                | Project                    |                      | Completed     | 05/09/2016                     | 03/31/2017                   | 05/09/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b>  |                                | Project                    |                      | Completed     | 04/01/2015                     | 03/31/2020                   | 01/01/2017        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| M3:3. Implement action plans and monitor ongoing progress making adjustments as necessary.   |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Task</b><br>M4:1. CQAC, in collaboration with vendor, will identify a medical record audit tool and auditing process, to ensure compliance with process and procedures developed.   |                                | Project                    |                      | Completed     | 06/14/2016                     | 03/31/2017                   | 06/14/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M4:2. As part of the participating provider agreement, AMCH PPS will ensure access to medical records for audit purposes.   |                                | Project                    |                      | Completed     | 04/01/2015                     | 03/31/2020                   | 01/01/2017        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M4:3. The sub-committee will conduct a semi-annual review to ensure adherence to project-specific processes and procedures, QA/QI activities, and the achievement of project objectives.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M5:1. The sub-committee will assist in the development of dashboards of quality metrics for ongoing performance improvement.  |                                | Project                    |                      | Completed     | 06/13/2016                     | 03/31/2017                   | 06/13/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M5:2. The sub-committee will provide quarterly updates to the AMCH PPS CQAC and other stakeholders on activities, results and next steps. Access to AMCH PPS web portal will be available in subsequent quarters for aggregated performance dashboards. |                                | Project                    |                      | Completed     | 05/09/2016                     | 03/31/2017                   | 05/09/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Milestone #11</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.   | DY2 Q4                         | Project                    | N/A                  | Completed     | 10/05/2015                     | 03/31/2017                   | 10/05/2015        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                                | Project                    |                      | Completed     | 10/05/2015                     | 03/31/2017                   | 10/05/2015        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M1:1. Articulate the scope, objectives and requirements of a patient tracking system to support an effective population health management across PPS entities.  |                                | Project                    |                      | Completed     | 04/01/2016                     | 03/31/2017                   | 04/01/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                                | Project                    |                      | Completed     | 10/05/2015                     | 11/30/2015                   | 10/05/2015        | 11/30/2015      | 12/31/2015                  | DY1 Q3  |
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                                | Project                    |                      | Completed     | 04/01/2016                     | 03/31/2017                   | 04/01/2016        | 03/31/2017      | 03/31/2017                  | DY2 Q4  |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:4. Implement training sessions to educate participating partners on how to utilize the additional technical platforms.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Utilize population health IT vendor to support the needs of the PPS and individual organization/practice to track their population groups for population health management needs. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |               | Completed | 04/01/2016          | 03/31/2017        | 04/01/2016 | 03/31/2017 | 03/31/2017       | DY2 Q4                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type                             | File Name   | Description  | Upload Date         |
|--|---------|---------------------------------------|---|--|---------------------|
| Develop written treatment protocols with consensus from participating providers and facilities.  | mcintyc | Policies/Procedures                   | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES4_P&P_BHNNY_Milestone_4_Metric_2_13006.pdf  | BHNNY Milestone 4 Metric 2   | 04/26/2017 02:26 PM |
|  | mcintyc | Meeting Materials                     | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES4_MM_BHNNY_Milestone_4_Metric_1_13004.pdf   | BHNNY Milestone 4 Metric 1   | 04/26/2017 02:25 PM |
|  | mcintyc | Templates                             | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES4_TEMPL_Behavioral_Health_Meeting_Schedule_Template_13003.xlsx  | Behavioral Health Meeting Schedule Template  | 04/26/2017 02:24 PM |
| Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. | mcintyc | Documentation/Certification           | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES5_DOC_BHNNY_3aai_Milestone_5_Metric_2_13792.pdf   | BHNNY 3aai Milestone 5 Metric 2  | 04/27/2017 12:22 PM |
|  | mcintyc | Templates                             | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES5_TEMPL_Saratoga_Hospital_MHI_3_a_ii_Milestone_5_Metric_1_Domain_1_Participating_Provider_List_13789.xlsx | Saratoga Hospital MHI 3 a ii Milestone 5 Metric 1 Domain 1 Participating Provider List | 04/27/2017 12:20 PM |
|  | mcintyc | Templates                             | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES5_TEMPL_Columbia_Memorial_Health_MH_Milesotne_5_Metric_1_Participating_Provider_List_13784.xlsx           | Columbia Memorial Health MH Milestone 5 Metric 1 Participating Provider List           | 04/27/2017 12:19 PM |
| Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.   | mcintyc | Other                                 | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_OTH_Narrative_3aai_Milestone_10_Remediation_15318.pdf  | Narrative 3aai Milestone 10 Remediation  | 06/19/2017 11:25 AM |
|  | mcintyc | Other                                 | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_OTH_BHNNY_Remediation_3aai_M10_15317.pdf   | BHNNY Remediation 3aai M10   | 06/19/2017 11:24 AM |
|  | mcintyc | Baseline or Performance Documentation | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_BASE_BHNNY_3aai_Milestone_10_metric_5_13019.pdf  | BHNNY 3aai Milestone 10 metric 5   | 04/26/2017 02:33 PM |
|  | mcintyc | Other                                 | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_OTH_BHNNY_3aai_Milestone_10_metric_4_13016.pdf   | BHNNY 3aai Milestone 10 metric 4   | 04/26/2017 02:32 PM |
|  | mcintyc | Meeting Materials                     | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_MM_BHNNY_3aai_Milestone_10_metric_3_13015.pdf  | BHNNY 3aai Milestone 10 metric 3   | 04/26/2017 02:31 PM |





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**Prescribed Milestones Current File Uploads**

| Milestone Name   | User ID | File Type                   | File Name   | Description                      | Upload Date         |
|--|---------|-----------------------------|---|----------------------------------|---------------------|
|  | mcintyc | Documentation/Certification | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_DOC_BHNNY_3aai_Milestone_10_metric_2_13014.pdf | BHNNY 3aai Milestone 10 metric 2 | 04/26/2017 02:31 PM |
|  | mcintyc | Meeting Materials           | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES10_MM_BHNNY_3aai_Milestone_10_metric_1_13012.pdf  | BHNNY 3aai Milestone 10 metric 1 | 04/26/2017 02:30 PM |
| Use EHRs or other technical platforms to track all patients engaged in this project. | mcintyc | Screenshots                 | 1_DY2Q4_PROJ3aai_MDL3aai3_PRES11_SS_BHNNY_3aai_Milestone_11_metric_1_13027.pdf  | BHNNY 3aai Milestone 11 metric 1 | 04/26/2017 02:35 PM |

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text  |
|---|---|
| Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.  |   |
| 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. |   |
| Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.               |   |
| Develop written treatment protocols with consensus from participating providers and facilities.   | <p>Metric 1<br/>BHNNY has held meetings of the Behavioral Health Crisis Stabilization Services Sub-committee since March 2016. This group consists of behavioral health crisis service providers and leaders. With regular updates from partners regarding their crisis service initiatives, the BHNNY behavioral health team identified mobile crisis providers as a subset on which to focus regarding treatment protocols. To do so, BHNNY convened a Mobile Crisis Protocol Workgroup on 2/13/2017 consisting of clinicians and leaders from PPS mobile crisis services who also were members of the Project 3.a.ii Sub-Committee. Organizations shared their mobile crisis treatment protocols so as to work towards consensus on key elements, while allowing organizations flexibility to tailor protocols to their needs, resources, and patient populations. Participants discussed modifying existing treatment protocols as appropriate. At the BHNNY Behavioral Health Quality Improvement Subcommittee on 2/24/2017, particular workgroup members discussed plans to update their treatment protocols accordingly. For a separate crisis initiative, four Columbia and Greene County care management agencies met on 2/16/2017 to develop protocol for the Columbia Memorial Hospital Inpatient Health Home Collaborative pilot program.</p> <p>Metric 2<br/>Treatment protocols are in place for three distinct crisis stabilization service initiatives, and are presented separately below.<br/>BHNNY contains four behavioral health mobile crisis stabilization services, run by three organizations: Parsons Child and Family Center, Albany County Department of Mental Health, and the Mental Health Association of Columbia &amp; Greene Counties. Written treatment protocols are in place for all of these services and are attached. While formats differ, each protocol addresses a range of key elements, including: receiving referrals; contacting 911/law enforcement; phone/mobile interventions; identification of risk/safety concerns; contacting providers; dispositions, and documentation of services.<br/>BHNNY has also sought to decrease avoidable ED behavioral health crisis visits by supporting the Albany Law Enforcement Assisted Diversion (LEAD) Program. Here, police officers divert individuals with unmet behavioral health needs into trauma-informed intensive case-management, which can involve behavioral health services. It is hoped that access to care management and behavioral health services will decrease risk of behavioral health crises, and provide patients with appropriate alternatives to the ED during future crises. The attached LEAD Operational Guideline document presents the LEAD protocol, including pre-arrest diversion, case management intake/assessment, individual service plan, service coordination, communication and case closure.<br/>BHNNY has also sought to decrease avoidable ED behavioral health crisis visits through development of the Columbia Memorial Hospital Inpatient Health Home</p> |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text   |
|---|--|
|   | <p>Collaborative pilot program. Eligible patients admitted to Columbia Memorial Hospital inpatient psychiatry department are connected to one of four PPS partner care management organizations. These organizations provide care management services and connect patients to outpatient behavioral health services. It is hoped that increased access to care management and behavioral health services will decrease risk of behavioral health crises and provide patients with access to more appropriate levels of care and alternatives to the ED during future crises. The attached CMH-CGCMA Partnership Document presents the program protocol, including the referral process and schedule, meeting with patients, consent procedure and inter-agency communication.</p>  |
| <p>Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.</p> | <p>Metric 1:</p> <p>BHNNY has partnered with three hospitals that provide specialty psychiatric services and crisis-oriented psychiatric services: Saratoga Hospital, Columbia Memorial Hospital and Albany Medical Center. Each hospital has a crisis evaluation process in their point of entry the ED, an inpatient psychiatric unit, and outpatient psychiatric services. These hospitals are key and active BHNNY participants, whose psychiatric and crisis-oriented services are vital to BHNNY's patient population.</p> <p>Metric 2:</p> <p>BHNNY collaborated with our partners on a three step process aimed at improving access to psychiatric and crisis oriented services throughout the PPS. These steps included evaluating access to psychiatric services, identifying improvement areas, and implementing improvement steps. This process is summarized in the document "BHNNY Psychiatric Services Access Plan". This strategy document summarizes information collected from partners in a variety of methods, and identifies the difficulties accessing psychiatric and crisis services. The PPS intends to utilize this strategy document for future strategic planning as well as a guide to improve current access to psychiatric services.</p> <p>Barriers to access identified by our partners essentially revolved around a lack of resources to respond to increased demand for services. Examples of these barriers include the following: limited staffing and hours of operation, a need to provide more face to face services and overnight services, and a lack of sub-acute settings to provide crisis intervention, stabilization services, and intensive case management.</p> <p>The plan identifies the following improvement areas on which to focus: care management to support outpatient behavioral health treatment, follow-up, and adherence; mobile crisis service capacity; sub-acute crisis stabilization resources; processes aimed at improving follow-up for identified behavioral health needs; timely scheduling of referred patients; and expanded hours and same day appointments.</p> <p>Through project alignment, BHNNY Psychiatric Services Access Improvement Plan has been activated to include the following projects and strategies to improve access to psychiatric services in the PPS;</p> <ul style="list-style-type: none"> <li>• Project 3.a.ii Behavioral Health Community Crisis Stabilization Project Request for Proposals – This meets needs of expanded access to hours, case management, behavioral health referrals and sub-acute stabilization.</li> <li>• Consulting Psychiatrist in the 3.a.i IMPACT Model – This project increases access to psychiatrists through a stepped care integrated treatment model.</li> <li>• BHNNY Phase II Contracting – Contract metrics incentivizes improving follow up for behavioral health needs, timely scheduling of referred patients as well as expanded hours and same day appointments.</li> <li>• Columbia Memorial Hospital &amp; Care Management Agency Inpatient Collaborative – Process that connects eligible patients to Health Home services and coordinates care to increase outpatient behavioral health referrals and decrease ED visits and inpatient hospitalizations.</li> <li>• 2.a.ii Health Home at Risk / BHNNY-CARES – Through this program, individuals with one chronic condition who receive care coordination care management services, will receive support from care managers to obtain access to psychiatric services, and an opportunity to improve their condition and decrease the likelihood of developing a second condition to ultimately decrease high medical costs including hospitalizations.</li> </ul> |
| <p>Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).</p>                              |  |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text   |
|---|--|
| Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.  |  |
| 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. |  |
| Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.  |  |
| Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.  | <p>Metric 1:<br/>The BHNNY PPS has created an active Behavioral Health Quality Improvement (BHQI) sub-committee, overseen by the Clinical and Quality Affairs Committee (CQAC) and focused on behavioral health quality measures and initiatives. This sub-committee consists of medical and behavioral health providers and leaders, and representatives from care management organizations. The subcommittee has met on multiple occasions and has approved a sub-committee charter and the BHNNY Behavioral Health Quality Improvement Plan, which were also approved by the CQAC. Agenda topics have included initiatives related to increasing rates of screening for depression, increasing follow-up after hospitalization, increasing care management for recently hospitalized patients, and enhancing mobile crisis treatment protocols.</p> <p>Metric 2:<br/>The BHQI and CQAC approved the BHNNY Behavioral Health Quality Improvement Plan, which serves as the PPS quality improvement plan and calls for partner-specific QI activities. Saratoga Hospital Community Health Center's successful initiative to increase screening for depression in primary care is such an initiative. This PPS partner analyzed their baseline screening rates, identified a significant need, developed and implemented a site specific implementation plan, and documented and presented the results.</p> <p>The Mental Health Association of Columbia &amp; Greene Counties' Mobile Crisis Assessment Team expansion is a similar initiative. This PPS partner collected and analyzed service data, identified unmet demand, and developed and submitted an implementation plan/proposal for funding of this expansion to the BHNNY executive team, which was approved. Expansion of this service is aimed at the following quality metrics: decreasing potentially avoidable ED visits for behavioral health crises, and increasing rates of follow-up after mental health hospitalization</p> <p>Metric 3:<br/>In reviewing PPS performance on behavioral health quality measures, the PPS identified a specific underperforming measure for which to develop an action plan: increasing rates of follow-up after mental health hospitalization. This measure was discussed at behavioral health sub-committee meetings, where BHNNY staff presented literature delineating strategies to increase rates of follow up. As part of Phase II contracting, BHNNY also developed contract metrics that incentivized processes aimed at improving performance on these measures. Importantly, BHNNY PPS partners developed the Columbia Memorial Hospital Inpatient Health Home Collaborative Pilot. They developed an action plan to increase follow-up after mental health hospitalization by connecting eligible psychiatric inpatients with Health Home downstream care management organizations to provide care management services and support patients receiving outpatient follow-up after hospitalization. Data from MAPP illustrating PPS-wide improvement on this quality metric was presented to the BHNNY BHQI Subcommittee.</p> <p>Metric 4:<br/>As a part of their initiative to increase screening for depression, Saratoga Hospital's Saratoga Community Health Center and Koinonia Primary Care conduct periodic self-audits, results of which were presented to the Behavioral Health Quality Improvement Subcommittee.</p> <p>Metric 5:<br/>A range of PPS behavioral health quality outcome measures were discussed in the BHNNY's March Newsletter. Moreover, progress on specific initiatives aimed at improving performance on quality metrics, including rates of screening for depression and follow-up after hospitalization for mental illness, were presented to stakeholders at various BHNNY BHQI sub-committee meetings.</p> |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text  |
|---|---|
| <p>Use EHRs or other technical platforms to track all patients engaged in this project.</p> | <p>The BHNNY PPS conducted a survey in September 2015 to understand the current status of data collection within partner EHR systems, as well as any patient registries that organizations create on their own or report into from a population health perspective. In October 2015 the BHNNY PPS began collecting patient engagement data from partnering organizations with a POA and BAA in place on a quarterly basis. Data registry enhancements became a contract deliverable in July of 2016 and each project required additional data elements on a monthly basis. Each patient registry contains Medicaid patient's first name, last name, CIN, Date of Service, NPI, and additional defining elements depending on the project.</p> <p>The patient registries, along with patient engagement data, will be stored securely within the BHNNY PMO following the PPS Data Security and Confidentiality Plan protocol and utilized at an aggregate level as a means to help identify target areas of improvement. The patient registries and the accompanied structured reports help to foster a comprehensive macro-perspective of the patient population that can be successfully utilized to target patients and ensure that engagement across the projects and participating organizations continues. As the BHNNY PPS identifies a secure means to share data, population health registries will also help organizations target patients for project participation. Additional registries will be created based on the project needs and with active participation of relevant project committees, Technology and Data Management Committee and other stakeholders.</p> <p>Project 3.a.ii patient registry includes all Medicaid patients receiving Crisis Stabilization services from participating sites as determined in the project requirements. Two examples are being provided for satisfaction of this milestone from two of our partners who provide Mobile Crisis Services. Ultimately, our goal is to have all community based organizations able to send each other secure messages so that for example an individual was seen by mobile crisis on the weekend, and their psychiatrist gets an automatic alert with the summary of the visit the next business day. The PPS is working to have community partners and Care Management Providers sign agreements with HIXNY, which will allow them to access and share clinical data. In fact, the majority of our Care Management providers are actively utilizing Hixny to track patients.</p> <p>In the first EHR sample from our partner Northern Rivers who operates Mobile Crisis Services for 3 counties in the PPS, screen shots were provided showing the different stages of the interaction they document. Two important aspects of their documentation are as follows: documentation is done in real time so that future client interactions are intercepted by past touches of client. A summary is given to the client at the end of the interaction with future appointments as well as a summary sent to any providers that are involved with the client's care.</p> <p>In the second EHR sample from our partner Mobile Crisis Assessment Team of Mental Health Association of Columbia-Greene Counties, a sample of the entire electronic record was provided. This shows not only the detailed information they capture, but like our other partner, documentation is done in real time, to ensure future client interactions are intercepted by past touches of client. This partner also provides client with a summary at the end of the interaction, including near future appointments. Like our other partner, MCAT also communicates verbally and electronically with providers involved with or to be involved with client care.</p> |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments |
|--------------|-----------------|--------------------|
| Milestone #1 | Pass & Ongoing  |                    |
| Milestone #2 | Pass & Ongoing  |                    |
| Milestone #3 | Pass & Ongoing  |                    |
| Milestone #4 | Pass & Complete |                    |
| Milestone #5 | Pass & Complete |                    |



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**Milestone Review Status**

| <b>Milestone #</b>   | <b>Review Status</b> | <b>IA Formal Comments</b> |
|----------------------|----------------------|---------------------------|
| <b>Milestone #6</b>  | Pass & Ongoing       |                           |
| <b>Milestone #7</b>  | Pass & Ongoing       |                           |
| <b>Milestone #8</b>  | Pass & Ongoing       |                           |
| <b>Milestone #9</b>  | Pass & Ongoing       |                           |
| <b>Milestone #10</b> | Pass & Complete      |                           |
| <b>Milestone #11</b> | Pass & Complete      |                           |



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**✔ IPQR Module 3.a.ii.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**IPQR Module 3.a.ii.5 - IA Monitoring**

**Instructions :**



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**Project 3.b.i – Evidence-based strategies for disease management in high risk/affected populations (adult only)**

**✔ IPQR Module 3.b.i.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

There are several risks to this project, including the creation of evidence-based guidelines for disease management and obtaining provider buy-in. Changing care protocols will require the identification of physician champions to lead the initiatives and a significant number of providers will be required to adopt the established protocols. Many of these new care protocols will require additional staffing and training, which will be a cost born upon the organization. PCP and CBO participation is essential to make this project successful. It will also be imperative to get organizations to agree to open-access blood pressure measurements. Achieving NCQA 2014 Level 3 PCMH standards within the speed and scale constraints is a risk because of delays in patient attribution, opt-out, and related data issues.

This project also requires patient cooperation, which will be difficult to achieve. Relying on individual patients to actively participate in their care and be personally responsible for blood pressure measurements and self-management goals will be difficult. Finally, the inconsistency in technology from provider-to-provider will have to be reduced. Technology includes home monitoring equipment, which will require a coordinated effort to deploy and utilize.

The identified risks above can be mitigated through incentives, education, engagement, and innovative technology. In order to obtain provider, organization, PCP and CBO buy-in, incentives will be provided for the use of established care protocols. Physician champions will be offered additional stipends as leaders within the PPS. With new care guidelines, unnecessary ER visits could be reduced, thus decreasing the expenses to the participating MCOs. Patients will have to be educated and trained on proper use of equipment including home monitoring equipment. Providers will have to be diligent in their efforts to keep patients engaged. Finally, incentives will be provided to organizations that upgrade/update their technologies to be more in line with their PPS partners. To address PCMH certification timeline requirements, the PMO will expedite the learning collaborative and provide technical assistance to locations needing help and guidance in the certification process.





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**✔ IPQR Module 3.b.i.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY2,Q2                 | 7,179                  |

|              | Year,Quarter             | DY2,Q1 | DY2,Q2 | DY2,Q3 | DY2,Q4 |
|--------------|--------------------------|--------|--------|--------|--------|
| PPS Reported | Baseline Commitment      | 6,102  | 7,179  | 6,461  | 7,179  |
|              | Quarterly Update         | 3,558  | 3,990  | 3,990  | 4,821  |
|              | Percent(%) of Commitment | 58.31% | 55.58% | 61.76% | 67.15% |
| IA Approved  | Quarterly Update         | 0      | 657    | 0      | 1,260  |
|              | Percent(%) of Commitment | 0.00%  | 9.15%  | 0.00%  | 17.55% |

**⚠ Warning: PPS Reported - Please note that your patients engaged to date (4,821) does not meet your committed amount (7,179) for 'DY2,Q4'**

**Current File Uploads**

| User ID  | File Type | File Name  | File Description                      | Upload Date         |
|----------|-----------|--|---------------------------------------|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ3bi_MDL3bi2_PES_TRAIN_AMCH_PPS__3_B_I_FINAL_FOR_MAPP_UPLOAD_13966.xlsx | AMCH PPS _3_B_I FINAL FOR MAPP UPLOAD | 04/27/2017 03:58 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments  |
|---------------|---|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4. |



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**✔ IPQR Module 3.b.i.3 - Prescribed Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.   | DY2 Q2              | Project         | N/A           | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has implemented program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.   |                     | Project         |               | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Identify key stakeholders and participating provider organizations critical for successful project implementation.  |                     | Project         |               | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Create a PPS wide project sub-committee with representation from key stakeholders to oversee the project implementation.  |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Survey key stakeholders to assess current use and adherence to guideline-concordant care, range of services provided, and referral mechanisms.  |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:4. Working in collaboration with the project sub-committee and clinical experts across PPS, develop a draft document defining the future state for the management of cardiovascular disease utilizing evidence-based strategies. |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Submit the draft future state document to Clinical and Quality Affairs committee for review and approval.   |                     | Project         |               | Completed | 11/23/2015          | 09/30/2016        | 11/23/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. Identify a participating provider organization located in a geographic area with high burden of cardiovascular disease across the PPS region and finalize agreements for piloting the new model.                              |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:7. Complete a gap-analysis utilizing the current state   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| assessment and defined future state and, working in collaboration with the practice team, develop an action plan for the implementation of the new model.   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:8. Implement the approved action plan at the pilot participating provider site utilizing the PDSA approach.   |                     | Project         |  | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:9. Monitor ongoing performance, analyze clinical and operational outcomes and identify timelines/practice sites for spread of successful tests of change.   |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:10. Implement PPS-wide CVD management program based on successful PDSA identified in steps 6-9.   |                     | Project         |  | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #2</b><br>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.  | DY2 Q2              | Project         | N/A  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Primary Care Provider (PCP)</u>     | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Assevero Anna-Maria D Md; Bala Virinchi; Baldini Gleda P Md; Brown Sheryl; Clark Catherine Nielsen; Harde Hasmukh C Md; Hechanova Arnel B Md; James Philip C Md; Mack Brigid; Manjunath Kallanna Md; O'Brien Joanne Elizabeth; Owen Claudina; Paeglow Robert John Md; Ray David Allan Md; Sacco Joseph P Md; Sgarlata Donna L; Sheehan Rebecca; Signor Connie J; Stein Rhonda Danielle Md; Stetzer Lee; Vasquez Deborah A Md; Young Linda; Zeltner Theodore Harold Md |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Non-Primary Care Provider (PCP)</u> | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Bailey Laura M; Cavaliere Rosella Md; Dodd Jack Edward Jr; Drzymalski Jolanta; Friedman Cynthia Susan; Gara Maureen; Gsell Jennifer Lee; Guccione Angela Lee Md; Hausman Julia H; Hinds Marcel Eldon Md; Kamenir Steven A Md; Kang Harriet Md; Marici Edward M Do; Martin Mary Anne; Priest Michael Richard; Scherer Harvey D; Steindler Jason Harrison; Weinberg Gerard Md   |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Mental Health</u>                                  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Albany Medical Ctr Hospital; Columbia Memorial Hospital; Dodd Jack Edward Jr; Priest Michael Richard; Rehabilitation Supp Svcs C; Scherer Harvey D  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>PPS uses alerts and secure messaging functionality.  |                     | Project         |  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| <b>Task</b><br>M1:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee. |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Work with participating providers, not currently using EHRs, to incentivize EHR adoption for patient care management.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.   |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:5. Utilizing the IT-TOM pilot experience, design the PPS wide future state connectivity model.   |                     | Project         |               | Completed | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M1:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.   |                     | Project         |               | Completed | 02/12/2016          | 06/30/2016        | 02/12/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.   |                     | Project         |               | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. Perform a current state assessment on the interconnected systems' ability to send, receive and use alerts and secure messages to facilitate timely care coordination and management.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Define the future state and select appropriate vendor for implementation of alerts and secure messaging functionality by clinicians and staff across the Integrated Delivery System for safe and effective care transitions between EDs, Hospitals, specialists   |                     | Project         |               | Completed | 12/05/2015          | 09/30/2016        | 12/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| and PCMH site.  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:3: Conduct a gap analysis between current state and future state of using alerts and secure messaging functionalities for timely care coordination.   |                     | Project         |  | Completed   | 02/12/2016          | 09/30/2016        | 02/12/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:4: Implement training and secure messaging to support the use of alerts across the PPS.   |                     | Project         |  | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:5: Implement the necessary technical and operational system changes as required by the selected vendor for the use of alerts and secure messaging across the PPS.                             |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #3</b><br>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.                        | DY2 Q2              | Project         | N/A  | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).   |                     | Project         |  | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.   |                     | Provider        | Practitioner - Primary Care Provider (PCP) | In Progress | 10/05/2015          | 03/31/2018        | 10/05/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M1:1: Perform a current state assessment of participating safety-net providers' EHR systems' readiness to meet Meaningful Use (MU) Stage 2 CMS requirements.                                     |                     | Project         |  | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2: Develop practice specific action plan to implement necessary changes to workflows and documentation to improve performance on achieving the MU Stage 2 requirements.                       |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3: Ensure clinician and staff training on new processes is conducted.   |                     | Project         |  | Completed   | 06/02/2016          | 09/30/2016        | 06/02/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4: Require participating safety-net providers to attest that their EHR system meets MU Stage 2 CMS requirements.  |                     | Project         |  | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1: Establish a project sub-committee with representation from all participating primary care practitioners to facilitate and assure achievement of 2014 NCQA Level 3 PCMH recognition or APCM |                     | Project         |  | In Progress | 10/19/2015          | 03/31/2018        | 10/19/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |



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| by DY 3.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:2. Implement training sessions for senior leaders, clinicians and staff to learn about the benefits of achieving 2014 NCQA Level 3 PCMH recognition or APCM.   |                     | Project         |               | In Progress | 06/01/2016          | 03/31/2018        | 06/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:3. Utilizing a standardized assessment tool, perform a current state assessment of participating practices relative to their ability to provide patient-centered care consistent with the standards of NCQA Patient-Centered Medical Home as well as current certifications. |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:4. Perform a practice-specific gap analysis to determine the needed financial, technical and operational support needed to assure successful recognition by DY3.   |                     | Project         |               | In Progress | 07/01/2016          | 03/31/2018        | 07/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:5. Based on the gap analysis, establish priorities and develop a practice specific action plan to achieve the recognition and transform the care delivery model.   |                     | Project         |               | In Progress | 05/02/2016          | 03/31/2018        | 05/02/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:6. Create a learning collaborative for participating safety-net providers to assist in the development of necessary workflows and other changes to become NCQA Level 3 certified or APCM.  |                     | Project         |               | In Progress | 12/07/2015          | 03/31/2018        | 12/07/2015 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Task</b><br>M2:7. Assign specific roles and responsibilities for the participating practice leadership and timelines to implement the action plan effectively and achieve the recognition by DY 3.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:8. Monitor progress on a monthly basis to evaluate progress and assess needed additional resources to support practice transformation.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:9. Track site specific certification to assure all participating safety-net providers become Level 3 PCMH certified or APCM.   |                     | Project         |               | In Progress | 04/01/2016          | 03/31/2018        | 04/01/2016 | 03/31/2018 | 03/31/2018       | DY3 Q4                           |
| <b>Milestone #4</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.  | DY2 Q2              | Project         | N/A           | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                     | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b>  |                     | Project         |               | Completed   | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| M1:1. Articulate the scope, objectives and requirements of a patient tracking system to support an effective population health management across PPS entities.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                     | Project         |               | Completed   | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |               | Completed   | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Implement training sessions to educate participating partners on how to utilize the additional technical platforms.   |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Utilize population health IT vendor to support the needs of the PPS and individual organization/practice to track their population groups for population health management needs.         |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #5</b><br>Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).  | DY2 Q2              | Project         | N/A           | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has implemented an automated scheduling system to facilitate tobacco control protocols.   |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS provides periodic training to staff to incorporate the use of EHR to prompt the use of 5 A's of tobacco control.  |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Provide support for the development and/or update of Clinical Decision Support Systems (CDSS) in EHR systems across the PPS to prompt providers to complete the 5 A's of tobacco control. |                     | Project         |               | In Progress | 05/06/2016          | 03/31/2017        | 05/06/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. Assure the completion of staff training at the practice level to make effective use of the new CDSS features in EHR.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Define guidelines for required tobacco control prompts in   |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| participating safety-net EHR systems.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:4. Implement processes to generate practice and practitioner specific dashboards for performance improvement initiatives.  |                     | Project         |               | In Progress | 05/06/2016          | 03/31/2017        | 05/06/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:5. Working with clinical leadership at the practice level, develop systems for timely sharing of performance reports with practice teams and individual practitioners.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Create training protocols and education participating providers about using the EHR to document the 5 A's of tobacco control.   |                     | Project         |               | In Progress | 06/02/2016          | 03/31/2017        | 06/02/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:2. Use these training protocols to provide periodic clinician and staff training at the practice level to make effective use of the new CDSS features in EHR to prompt the use of 5 A's of tobacco control.                  |                     | Project         |               | In Progress | 06/02/2016          | 03/31/2017        | 06/02/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M2:3: Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #6</b><br>Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.  | DY2 Q2              | Project         | N/A           | Completed   | 05/26/2016          | 09/30/2016        | 05/26/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Practice has adopted treatment protocols aligned with national guidelines, such as the National Cholesterol Education Program (NCEP) or US Preventive Services Task Force (USPSTF).   |                     | Project         |               | Completed   | 05/26/2016          | 09/30/2016        | 05/26/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. The CQAC will oversee the implementation of evidence-based strategies for the management of CVD in high-risk individuals. Ensure clinician representation from key primary care and specialist practices across AMCH PPS. |                     | Project         |               | Completed   | 06/27/2016          | 09/30/2016        | 06/27/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Complete a gap-analysis utilizing the current treatment protocols and defined future state, creating an implementation plan by provider and a phased roll-out.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. The CQAC, in collaboration with partners will review protocols outlined in national guidelines such as National Cholesterol Education Program (NCEP) and/or U.S. Preventive   |                     | Project         |               | Completed   | 06/27/2016          | 09/30/2016        | 06/27/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |





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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Services Task Force (USPSTF). Draft a PPS-wide policy for clinical practice guidelines and treatment protocols for hypertension and high cholesterol.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:4. The CQAC will review and approve policies and treatment guidelines prior to dissemination.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Using a PDSA approach, pilot policies and treatment guidelines at one or more selected sites to field-test feasibility and adoptability at the provider level.  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. Adopt standardized clinical protocols for the management of hypertension and high cholesterol across the PPS.   |                     | Project         |               | Completed | 06/27/2016          | 09/30/2016        | 06/27/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:7. Evaluate adherence to the treatment protocols and align incentives as necessary to improve adoption.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #7</b><br>Develop care coordination teams including use of nursing staff, pharmacists, dietitians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management. | DY2 Q2              | Project         | N/A           | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Clinically Interoperable System is in place for all participating providers.  |                     | Project         |               | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Care coordination teams are in place and include nursing staff, pharmacists, dietitians, community health workers, and Health Home care managers where applicable.  |                     | Project         |               | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Care coordination processes are in place.   |                     | Project         |               | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Perform current state assessment of the IT and Clinical Information Systems (CIS) available at participating provider organizations.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Identify participating sites that utilize a care coordination team from the current state assessment.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Identify opportunities to enhance care coordination through additional staffing, processes, shared care plans, patient self-management training.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| <b>Task</b><br>M1:4. Utilizing the IT-TOM pilot experience, design the PPS-wide future state CIS integration.  |                                | Project                    |                      | Completed     | 06/01/2015                     | 03/31/2016                   | 06/01/2015        | 03/31/2016      | 03/31/2016                  | DY1 Q4  |
| <b>Task</b><br>M1:5. Identify standardized toolkits to support care coordination efforts across the PPS.   |                                | Project                    |                      | Completed     | 04/01/2016                     | 09/30/2016                   | 04/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:6. Submit the draft future state of partners in relation to CIS connectivity, utilizing the current state assessment.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M1:7. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan by provider and a phased roll-out.   |                                | Project                    |                      | Completed     | 02/12/2016                     | 09/30/2016                   | 02/12/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:8. CQAC and TDMC will oversee the development and implementation of the action plan to ensure a Clinically Interoperable System is in place in order to share information and ongoing metrics with team members. Ensure key representation from identified providers and partners on these committees. |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M1:9. Monitor progress on the effectiveness of the connectivity and its ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up to support timely care management decisions.   |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M2:1. Based on best practice models, the CQAC along with the PMO will define and develop appropriate care coordination/care management models to support a patient-centered approach. Ensure clinician representation from key primary care and specialist practices across AMCH PPS.                     |                                | Project                    |                      | Completed     | 06/22/2016                     | 09/30/2016                   | 06/22/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M2:2. Collaborate with Workforce Coordinating Council to identify existing/future staffing resources required for an effective implementation of the new care coordination/care management model.   |                                | Project                    |                      | Completed     | 06/01/2016                     | 09/30/2016                   | 06/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M2:3. Identify a network of an actively engaged practice and community-based organizations to pilot the new care coordination/care management model for managing hypertension.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b>  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |



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| M2:4. Create a multi-disciplinary team comprising of nursing staff, pharmacists, dieticians, community health workers and Health Home care managers as appropriate linked to the pilot sites.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:5. Based on the successful pilots, expand the team approach for care management and coordination to other participating safety-net providers as appropriate.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:1. Identify and evaluate existing care coordination/care management processes within the participating organizations.   |                     | Project         |               | Completed | 04/01/2016          | 05/26/2016        | 04/01/2016 | 05/26/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M3:2. Develop and implement policies and procedures to support and sustain effective care coordination/care management across participating practitioner organizations for managing CVD.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:3. Identify a network of an actively engaged practice and community-based organizations to pilot the new care coordination/care management model for managing CVD.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Develop an action plan, including an assessment of lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy, and confidence in self-management, to pilot the new care coordination model for patients with CVD across the pilot sites. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:5. At the pilot practice sites, identify the appropriate patient population for care coordination/care management and assign them to identified care coordination/management teams for ongoing care management.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:6. Conduct PDSAs to define effective and sustainable changes for expansion to other participating entities.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:7. Implement processes to assure lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy, and confidence in self-management to achieve improved clinical outcomes, such as BP control.   |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:8. Provide training to participating sites to ensure processes are supported and understood by staff as necessary.  |                     | Project         |               | Completed | 06/02/2016          | 09/30/2016        | 06/02/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b>   |                     | Project         |               | Completed | 05/26/2016          | 09/30/2016        | 05/26/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| M3:9. Expand care management processes across the PPS as necessary and appropriate, to include at least 80% of participating PCPs.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Milestone #8</b><br>Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.  | DY2 Q2              | Project         | N/A           | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>All primary care practices in the PPS provide follow-up blood pressure checks without copayment or advanced appointments.   |                     | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Assess current policy and procedures at participating practices related to timely and effective follow-up of patients with hypertension.  |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Identify a pilot site and determine required changes to policy and procedures, system and workflow issues required to establish an open access model for timely follow-up of BP.  |                     | Project         |               | Completed   | 06/27/2016          | 09/30/2016        | 06/27/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Implement open access and elimination of copays in collaboration with pilot site administration and medical staff.  |                     | Project         |               | Completed   | 06/27/2016          | 09/30/2016        | 06/27/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Working with TDMC, identify patient registries to support patient reminders for follow-up blood pressure checks. Implement patient registries and identify opportunities for collaboration with CBOs and community resources for follow-up blood pressure checks. |                     | Project         |               | Completed   | 05/18/2016          | 09/30/2016        | 05/18/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Coordinate with pharmacies to increase patient awareness of "Million Hearts™ Team Up. Pressure Down." education program.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Provide health coaching/aid in self management goals, (i.e. blood pressure journals and medication tracker wallet card).  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:7. Expand pilot to include participating primary care sites by creating open access and elimination of copays for BP checks.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #9</b><br>Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.  | DY2 Q2              | Project         | N/A           | In Progress | 05/17/2016          | 03/31/2017        | 05/17/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b>  |                     | Project         |               | In Progress | 05/17/2016          | 03/31/2017        | 05/17/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| PPS has protocols in place to ensure blood pressure measurements are taken correctly with the correct equipment.   |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Task</b><br>M1:1. Project sub-committee or CQAC will define best practices and develop policy and procedures for taking accurate blood pressure measurements at all participating practitioner sites.   |                                | Project                    |                      | In Progress   | 05/17/2016                     | 03/31/2017                   | 05/17/2016        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M1:2. Ensure availability of correct equipment at all locations, evaluate current workflows and implement new processes supported by appropriate staff training on accurate blood pressure measurement and documentation by applicable staff.   |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M1:3. Assure ongoing staff competencies for accurate measurement of blood pressure by direct observation, frequent assessment, and training.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Milestone #10</b><br>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.   | DY2 Q2                         | Project                    | N/A                  | In Progress   | 10/05/2015                     | 09/30/2017                   | 10/05/2015        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>PPS uses a patient stratification system to identify patients who have repeated elevated blood pressure but no diagnosis of hypertension.   |                                | Project                    |                      | In Progress   | 10/05/2015                     | 09/30/2017                   | 10/05/2015        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>PPS has implemented an automated scheduling system to facilitate scheduling of targeted hypertension patients.  |                                | Project                    |                      | In Progress   | 10/05/2015                     | 09/30/2017                   | 10/05/2015        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>PPS provides periodic training to staff to ensure effective patient identification and hypertension visit scheduling.   |                                | Project                    |                      | In Progress   | 10/05/2015                     | 09/30/2017                   | 10/05/2015        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M1:1. TDMC will survey participating providers to assess system capabilities and processes regarding BP measurement. Survey results will inform the PMO regarding the feasibility of patient registries by site that can identify and stratify patients who have repeated elevated blood pressure readings but do not have a diagnosis of hypertension. |                                | Project                    |                      | In Progress   | 10/05/2015                     | 09/30/2017                   | 10/05/2015        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M1:2. At one pilot site, generate a list of patients with elevated blood pressure readings who do not have a diagnosis of hypertension. Validate the accuracy of the list with a review of sample of medical records.   |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |



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|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| <b>Task</b><br>M1:3. Assist practices without effective patient registries to acquire system capabilities for patient stratification.  |                                | Project                    |                      | In Progress   | 05/06/2016                     | 09/30/2017                   | 05/06/2016        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M2:1. Provide support for the development and/or update of Clinical Decision Support Systems (CDSS) in EHR systems across the PPS to prompt staff to schedule targeted hypertension patients for follow up.             |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M2:2. Assure the completion of staff training at the practice level to make effective use of the new CDSS features in EHR.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M2:3. Define guidelines for required hypertension control prompts in participating safety-net EHR systems.  |                                | Project                    |                      | In Progress   | 05/06/2016                     | 09/30/2017                   | 05/06/2016        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M2:4. Implement processes to generate practice and practitioner specific dashboards for performance improvement initiatives.  |                                | Project                    |                      | In Progress   | 05/06/2016                     | 09/30/2017                   | 05/06/2016        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M2:5. Working with clinical leadership at the practice level, develop systems for timely sharing of performance reports with practice teams and individual practitioners.   |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M3:1. Provide periodic staff training and feedback at the practice level to make effective use of the Clinical Decision Support System features in EHR to identify and schedule patients who need a hypertension visit. |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Task</b><br>M3:2: Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.  |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |
| <b>Milestone #11</b><br>Prescribe once-daily regimens or fixed-dose combination pills when appropriate.  | DY2 Q2                         | Project                    | N/A                  | In Progress   | 03/31/2017                     | 03/31/2017                   | 03/31/2017        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>PPS has protocols in place for determining preferential drugs based on ease of medication adherence where there are no other significant non-differentiating factors.   |                                | Project                    |                      | In Progress   | 03/31/2017                     | 03/31/2017                   | 03/31/2017        | 09/30/2017      | 09/30/2017                  | DY3 Q2  |
| <b>Task</b><br>M1:1. Project subcommittee, in collaboration with hypertension specialists, will develop clinical algorithms for medication management of hypertension with particular emphasis on once-                                |                                | Project                    |                      | On Hold       | 04/01/2015                     | 03/31/2020                   | 04/01/2015        | 03/31/2020      | 03/31/2020                  | DY5 Q4  |



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| daily regimens or fixed-dose combination pills when appropriate.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Determine the current status of the above regimens in payor and provider formularies, as well as the ease of prescribing in various EMRs.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. CQAC will review and approve the clinical algorithm for medication management.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Clinical leaders at participating practices will assume responsibilities for implementation of medication management guidelines at their facilities. When medication regimens are modified, adherence is reassessed to determine patient compliance.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Collaborate across the PPS to advocate for MCO formularies that align with recommended clinical medication algorithms, including preferred once-daily or fixed-dose combination pills without medication limitations or need for prior authorizations. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Implement continuous quality improvement processes to assure consistent adherence to the new medication management guidelines by all practitioners at the participating practices.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #12</b><br>Document patient driven self-management goals in the medical record and review with patients at each visit.   | DY2 Q2              | Project         | N/A           | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Self-management goals are documented in the clinical record.   |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS provides periodic training to staff on person-centered methods that include documentation of self-management goals.  |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Clinical leaders will assure the development of systems required for self-management plans. These plans will be documented by practice team members in collaboration with patients/families/caregivers, as appropriate.                                |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Clinical leaders at participating practices will assure implementation of required workflow changes to support consistent documentation of patient self-management goals in  |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| clinical records and review with patients at each visit.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:1. Provide clinician and staff training at initial orientation and annually on person-centered methods that include documentation of self-management goals within the EHR.                  |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:2: Develop role specific competency standards for each staff member and implement processes for evaluating staff competencies annually.   |                     | Project         |               | Completed | 06/02/2016          | 09/30/2016        | 06/02/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:3: Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.                                     |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #13</b><br>Follow up with referrals to community based programs to document participation and behavioral and health status changes.  | DY2 Q2              | Project         | N/A           | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has developed referral and follow-up process and adheres to process.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS provides periodic training to staff on warm referral and follow-up process.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Agreements are in place with community-based organizations and process is in place to facilitate feedback to and from community organizations.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Develop and implement PPS wide policies and procedures for referrals to community based programs and tracking referrals.   |                     | Project         |               | Completed | 06/03/2016          | 09/30/2016        | 06/03/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Identify and establish appropriate formal and informal agreements with community based organizations to facilitate timely access to services and feedback on the status of the referral. |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Participating practices will implement required workflow changes, staff training and information technology infrastructure to support operationalization of policies and procedures.     |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Implement PDSA and Rapid Cycle Improvement processes   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |





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|---|---------------------|-----------------|---------------|-------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| to monitor and continuously improve referral process and outcomes.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:1. Develop "Warm referral" protocol and annual clinician and staff training at the participating practice level on the new protocol and active tracking.  |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:2. Provide training on a periodic basis to appropriate clinical and non-clinical staff across the PPS.  |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:3: Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.   |                     | Project         |               | Completed   | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:1. Develop specific participation agreements to incentivize participation from community based organizations in a standardized feedback process.  |                     | Project         |               | Completed   | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:2. Execute participation agreements with targeted specific CBOs identified as participants in this project.   |                     | Project         |               | Completed   | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:3. Develop ongoing processes to facilitate ongoing communication between various practice-based and community-based providers to support an integrated approach to managing patient's hypertension. |                     | Project         |               | Completed   | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:4. Review and, if necessary, update, agreements annually.   |                     | Project         |               | Completed   | 04/18/2016          | 09/30/2016        | 04/18/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #14</b><br>Develop and implement protocols for home blood pressure monitoring with follow up support.  | DY2 Q2              | Project         | N/A           | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has developed and implemented protocols for home blood pressure monitoring.  |                     | Project         |               | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS provides follow up to support to patients with ongoing blood pressure monitoring, including equipment evaluation and follow-up if blood pressure results are abnormal.                             |                     | Project         |               | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS provides periodic training to staff on warm referral and follow-up process.  |                     | Project         |               | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b>   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|---|---------------------|-----------------|---------------|---------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| M1:1. CQAC will develop and approves protocols for implementation of home blood pressure monitoring with follow-up support for appropriate patients identified by clinicians across the participating practitioner organizations.       |                     |                 |               |         |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:2. Utilizing a PDSA cycle, the CQAC and Clinical leaders will identify a pilot location and implement protocols to provide appropriate follow-up clinical support for patients who self-monitor their blood pressure. |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Staff will be identified and trained on how patients should be taught to self-monitor their blood pressure.  |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Based on the success of the pilot, protocols will be rolled-out to participating providers for implementation of appropriate follow-up clinical support for patients who self-monitor their blood pressure.        |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. CQAC will identify sites demonstrating best practices using data reports and dashboards to be shared with practitioners on self-measured blood pressure monitoring with follow-up clinical support model.          |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Implement PDSA and Rapid Cycle Improvement processes to continuously monitor changes in blood pressure control rates.  |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. CQAC and clinical leaders at participating practices will identify and implement protocols to provide appropriate follow-up clinical support for patients who self-monitor their blood pressure.                   |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:2. Assist participating practitioners in identifying the appropriate type/s of follow-up clinical support to support their patients who self-monitor their blood pressure.  |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:3. Assist participating practitioners to identify support staff resources who can teach patients how to use monitors, validate devices, and review action plans and blood pressure logs.                              |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Data analysis will be conducted to establish baseline BP measures, track and monitor changes to baseline.  |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b>   |                     | Project         |               | On Hold | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| M2:5. Based on pilot sites identified above, additional patients and sites will be added to the home monitoring program as identified by PCPs across the PPS.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:6. Consistent with manufacturer specifications routinely evaluate the accuracy of home monitoring equipment to ensure that readings are complete accurate and recorded correctly.                        |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:7. Working with the care team, assess self-reports to determine accuracy and completeness of home monitoring data for clinical evaluation purposes, and record standardized information in the EHR.      |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:1. Develop "warm referral" protocol and annual clinician and staff training at the participating practice level on the new protocol and active tracking.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:2. Provide training on a periodic basis to appropriate clinical and non-clinical staff across the PPS.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:3. Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #15</b><br>Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.   | DY2 Q2              | Project         | N/A           | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has implemented an automated scheduling system to facilitate scheduling of targeted hypertension patients.  |                     | Project         |               | In Progress | 10/05/2015          | 03/30/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Provide support for the development and/or update of Clinical Decision Support Systems (CDSS) in EHR systems across the PPS to prompt staff to schedule targeted hypertension patients for follow up. |                     | Project         |               | In Progress | 05/06/2016          | 03/30/2017        | 05/06/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. Assure the completion of staff training at the practice level to make effective use of the new CDSS features in EHR.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Define guidelines for required hypertension control prompts in participating safety-net EHR systems.  |                     | Project         |               | In Progress | 10/05/2015          | 03/31/2017        | 10/05/2015 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b>  |                     | Project         |               | In Progress | 05/06/2016          | 03/31/2017        | 05/06/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| M1:4. Implement processes to generate practice and practitioner specific dashboards for performance improvement initiatives.  |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Working with clinical leadership at the practice level, develop systems for timely sharing of performance reports with practice teams and individual practitioners.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #16</b><br>Facilitate referrals to NYS Smoker's Quitline.  | DY2 Q2              | Project         | N/A           | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>PPS has developed referral and follow-up process and adheres to process.   |                     | Project         |               | In Progress | 03/31/2017          | 03/31/2017        | 03/31/2017 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Identify current referral rates to NYS Quit line and follow-up policies and procedures.  |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:2. Develop and implement PPS wide policy, procedures and action plan for referrals to NYS Smoker's Quit line.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:3. Utilize EHR reporting to ensure adherence and sustainability to changes in referral and follow-up processes.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #17</b><br>Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases. | DY2 Q2              | Project         | N/A           | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>If applicable, PPS has Implemented collection of valid and reliable REAL (Race, Ethnicity, and Language) data and uses the data to target high risk populations, develop improvement plans, and address top health disparities.            |                     | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>If applicable, PPS has established linkages to health homes for targeted patient populations.  |                     | Project         |               | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>If applicable, PPS has implemented Stanford Model through partnerships with community-based organizations.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:1. Collect and analyze valid and reliable REAL data to risk stratify targeted high risk populations.  |                     | Project         |               | Completed   | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Develop improvement and training activities to improve   |                     | Project         |               | Completed   | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| clinical outcomes and address health disparities.  |                     |                 |  |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:3. Implement continuous quality improvement strategies to improve processes and workflows and assess the effectiveness of the process.   |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Create a list of participating health home providers in the PPS network who serve the targeted patient populations.   |                     | Project         |  | Completed   | 10/05/2015          | 10/30/2015        | 10/05/2015 | 10/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Assess the current capabilities of participating health home providers for community care coordination and linkages to Patient Centered Medical Homes.                              |                     | Project         |  | Completed   | 11/02/2015          | 12/31/2015        | 11/02/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:3. Establish contractual agreements, if appropriate, with health home providers for care coordination and linkages to Patient Centered Medical Homes.                                  |                     | Project         |  | Completed   | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:1. Identify community-based organizations providing Stanford Model program to support self-management by patients with hypertension and elevated cholesterol.                          |                     | Project         |  | Completed   | 10/05/2015          | 10/31/2015        | 10/05/2015 | 10/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M3:2. Collaborate with identified community-based organizations to strengthen their existing capacity to expand access to Stanford Model for high-risk population with chronic illnesses. |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:3. Establish referral agreements between participating practitioners and CBOs for referral to Stanford Model training program.   |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Establish contractual agreements with CBOs to provide ongoing training to participating providers and staff on Stanford Model.  |                     | Project         |  | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #18</b><br>Adopt strategies from the Million Hearts Campaign.   | DY2 Q2              | Project         | N/A  | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million Hearts Campaign.   |                     | Provider        | Practitioner - Primary Care Provider (PCP)     | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million  |                     | Provider        | Practitioner - Non-Primary Care Provider (PCP) | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |



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| Hearts Campaign.   |                     |                 |               |             |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million Hearts Campaign.   |                     | Provider        | Mental Health | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:1. Develop, working in collaboration with the project sub-committee and clinical experts across PPS, a draft document highlighting strategies of the Million Hearts Campaign, including the Hypertension Change Package.                         |                     | Project         |               | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:2. Based on best practice models, the CQAC will develop appropriate care coordination/care management models to support a patient-centered approach to managing hypertension.  |                     | Project         |               | In Progress | 06/22/2016          | 09/30/2017        | 06/22/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Task</b><br>M1:3. CQAC will develop protocols for implementation of home blood pressure monitoring with follow-up support for patients identified by clinicians across the participating practitioner organizations. (see milestone 14)                         |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:4. Monitor effectiveness of tobacco use screening, cessation interventions and treatment using MU reports at the provider level.   |                     | Project         |               | On Hold     | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Provide ongoing training and make recommendations, as needed, to participating providers and staff on Million Hearts Campaign principles and initiatives, as well as best methods to track outcomes and quality indicators to ensure success. |                     | Project         |               | In Progress | 06/03/2016          | 09/30/2017        | 06/03/2016 | 09/30/2017 | 09/30/2017       | DY3 Q2                           |
| <b>Milestone #19</b><br>Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.  | DY2 Q2              | Project         | N/A           | Completed   | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has agreement in place with MCO related to coordination of services for high risk populations, including smoking cessation services, hypertension screening, cholesterol screening, and other preventive services relevant to this project.     |                     | Project         |               | Completed   | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to evaluate current contractual arrangements with payers for possible amendments.  |                     | Project         |               | Completed   | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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Delivery System Reform Incentive Payment Project  
DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type                                     | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:2. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to develop a framework that can be applied across the regional provider network.   |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. AMCH PMO will work with Medicaid MCOs to implement a roadmap following appropriate Federal and State laws, regulations and guidelines.  |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. AMCH PMO will work with its provider network to provide technical support and assistance to amend existing fee-for-service contracts.   |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to negotiate required contracts with MCOs.   |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. AMCH PMO, in collaboration with AMCH Integrated Delivery Systems Department, will discuss utilization trends, performance issues, and payment reform during monthly meetings with managed care organizations. |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:7. AMCH PMO will engage Medicaid MCOs in broader areas of concern to the PPS including financial sustainability, risk sharing, and compliance with competitive behaviors.  |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:8. AMCH PPS will execute negotiated contracts with MCOs to implement required elements of the CMS approved VBP roadmap.  |                     | Project         |   | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #20</b><br>Engage a majority (at least 80%) of primary care providers in this project.  | DY2 Q2              | Project         | N/A   | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has engaged at least 80% of their PCPs in this activity.  |                     | Provider        | <u>Practitioner - Primary Care Provider (PCP)</u> | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Providers Associated with Completion:**

Abigail R Watson; Agopovich Arsenio Md; Alarcon Gabriel Baldomero Md; Alegre Catalina; Allard Ingrid M Md; Anand Vinod Md; Aragona Sharon L; Arnold Hendrick Jr Md; Assevero Anna-Maria D Md; Bakst Gary Md; Bala Virinchi; Baldini Gleda P Md; Barats Lev Leonidovich Md; Barillas-Arias Lilliana Md; Barraclough Nancy L Np; Barry Kelli Ann; Baselice Marino Md; Beauchamp Cara E Rpa; Bedford Sharon L Md; Bednarek Rebecca S; Bertram Michael C Md; Betancourt Nicole; Blatz Sarah J Pa; Borden Eric Charles Md; Borden Jennifer Lynn; Borrelli Karin; Bossolini Marybeth M; Braden Diane Beers; Brady Helen H; Breen Martin Md; Brennan Tracey Lynn Md; Brennan-Jordan Nancy; Brilliant Rachelle I; Brown Sheryl; Brueggemann Christina Mchugh; Buff Christopher Md; Buhlinger Christine A Md; Burchell Randall Lawrence Md; Burke Michael Kevin Md; Busch Robert Steven Md; Butterfield Rebecca C Md; Caiazza Margaret; Campagna Kristine J Do; Caramore William J Md; Cardiel Alexander Md; Carrasco Andrea Y Md; Carrelle Raymond J Md; Cerone Jennifer Rebecca Boden; Chakraborty Ranen Kumar Md; Chaudhary Shawn Ahmad; Chava Prabhakar Rao Md; Cieszynski Veronica Eileen; Cioffi James Michael Md; Cirenza Emanuel Nicholas Md; Clark Catherine Nielsen; Clark Kristina Marie; Clark Melinda Beth Md; Clemente Kimberly; Cleney Holly K Md; Cleveland Byrd Md; Cohen Erik; Colman David Lawrence; Condly Angela G Md; Cossey Jason L; Costello



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Kevin B Md; Craig Maier; Culp Anita; D'Avella Wendy K; Daggett Brian George Md; Davis George Fabyan Md; De Waal Malefyt Stephen Karel Md; Deckelbaum Scott Howard Md; Devine Maria Kansas; Diamond Courtney Beth; Diaz Miguel Remigio Md; Dooley Kevin M Md; Doro Kristienna Martin; Dorsey Susan Serra Md; Dort Janice Beth; Dougherty Katherine; Downey Kathleen Md; Doyle Robin M Md; Duff Thomas Edward Jr Md; Dunne Christa Md; Dvorscak Amanda Jayne; Eldeiry Samer S Md; Eldredge Daniel; Elguero Carlos; Enzien Ernest M Jr Md; Ernst Cheryl Elaine; Ethier Gloria; Farrell Claudia Sales; Farrell Richard Md Jr; Ferrando-Ross Pedro I Md; Fishel Stephen C Md; Flanagan Jean Ansari Md; Flatau Irene Ruth Md; Flik Anna Grattan Md; Flynn Dedra Md; Friedrich Marcus Edmond; Fruiterman Mark L Md; Fruiterman Roy Md; Gandham Vijaya L Md; Gaylord James Md; Gebhard Paul E Jr Md; Gelfman Rachel Dawn; Gerety Gregg F Md; Getzke Nancy L Np; Gildersleeve Rebecca Ann Md; Gilroy Shelley Ann Md; Goldberg Steven Marc Md; Goldsmith Christina Marie; Gomez-Di Cesare Caroline M Md; Gradner Jill A Md; Greenblatt Michael J Md; Greenfield Country Medicine Pllc; Greenwald Lisa; Gross Eric J Md; Gupta Saaket Md; Guptill Gloria G; Halbig Robert Joseph Md; Haldeman Iii Richard J; Hanley Audra J Md; Harde Hasmukh C Md; Hart Ashley Rose; Hawthorne Jami M; Hechanova Arnel B Md; Hennessy Elisa; Herman David L Md; Hickey Lynn Leitner Md; Hobbs Patricia; Hogan-Moulton Amy E Md; Howard Elizabeth A Md; Hoy Christopher Dion Md; Irani Danesh S Rpa; Jacobs-Friedman Alon B; Jacobson Kirsten Elizabeth Md; James Philip C Md; Janowski Darcy A; Jeannie Ngygen; Jellinger Robert M Md; Johnson Charles A Do; Johnston Mary Md; Jorgensen Stephanie E Md; Jue Donald Md; Justa Shelley Md; Kanthal Marissa Loren; Katz Linda G Np; Kerr Hamish Alistair Md; Kineke Stephen Francis Md; Knapp George Sterling Md; Krizar Stephen Lewis Md; Kronick Gary Archer Md; Kucij Lyn Irene Rpa; Kudria Inna Md; Kumar Arbind Md; Lahtinen-Aley Kristina Marie Md; Larsen Douglas P; Lauren T Siy; Lawson Jessica L; Lecours Laura Yates Md; Lee Josephine M Md; Lehine Guy Daniel Md Faap; Leonidas Leonard Al Md; Light Deborah I; Lindstrom Jennifer E Md; Litts Warren C Jr Md; Livolsi Laruen L; Locke Elizabeth Anne Md; Ludwig Samantha Md; Mack Brigid; Madala Padmaja Md; Malin Julia Md; Mance Joan M; Manjunath Kallanna Md; Marici Kathleen Md; Marshall Robert Andrew Md; Marshall Ryan; Marthy-Noonan Anne K Md; Mary Patricia Shierly; Matott Heather Melissa; Mccarty Kaitlin Elizabeth; Mckeeon Elisabeth Waterman Md; Mead Daniel H Pa; Mekosh Susan Lynn; Meltz Theresa Ann Rpac; Merecki Eugene Karl Md; Merkhani Samuel Kabriyel Md; Meyer Vincent Edwin Md; Michelena Karen X; Mifsud Mindy; Mihindukulasuriya Joseph C Md; Millea Kerry; Miller Cynthia H Md; Mirza Shahida Parveen Md; Mitkoff Nathan B Md; Mitnick Neil Craig Md; Mitta Swatantra K Md; Monkash Jeff Ira Md; Monserrate Nicole Marie Md; Montelone Kimberly Ann Np; Moran Antoinette Collins Rpac; Muller Susan Marie Md; Murphy William Patrick Md; Murray Amy J; Mustafa Marianne A Md; Musto Ronald V Md; Navarette Kristen Alexandra; Newton Scott; Nguyen Hung Dinh Md; Nicholson Timothy Joseph; Nielson Robert P Jr Md; Nolan Florence A Md; Norton Neal David Jr Rpa; Noyes Kimberly; O'Brien Joanne Elizabeth; O'Brien Michael F; O'Loughlin Suzanne; Obeid Leila Ann; Oke Benjamin; Olszewski Peter; Omeara Shannon Lauren; Orsi Richard A Md; Osborn Kyle Thomas Md; Owen Claudina; Paeglow Robert John Md; Parent Colleen E Md; Parikh Nita S; Patel Umesh; Patil Nagaraja N Md; Pelnik-Fecko Tricia Ann Md; Pezzulo John Phillip Md; Pierce Jean Catherine Rpa; Pomichter John Stanley Md; Pope Ronald James Do; Price Marc David Md; Pride Boone Janice Md; Puthuparampil Beulah J Md; Quarrier John V Md; Quinn Barbara Hunter; Rabbin Linda S; Raggs Hope G; Ramani Ananthakrishnan Md; Ray David Allan Md; Reed Monica Renee; Reider Jacob Michael Md; Richman Charles H Md; Ricker Kerry Elizabeth Do; Rios Zandra M Md; Robinson Kristen; Roche Sean Patrick Md; Rodriguez-Goodemot Renee B Md; Rose Jennifer; Rosenbaum Elena; Rosenberger John Daniel Md; Roske Julia H Rpa; Rovere Rena Marie; Russell Jennifer Brooke; Rutter Ann; Sacco Joseph P Md; Salimah Dhanani Md; Saluja Ravinder Kaur Md; Samedov Nikolay Md; Samuel Jency Thomas; Santoro Eileen; Saunders Patricia V Md; Sazon Alexandr; Sazon Tatiana; Schnakenberg Eric C Md; Schnide Kenneth Ben Md; Schottler-Thal Carrin Md; Schumacher Thomas C Md; Schwartz Kenneth Md; Schynoll Gerald Klaus Md; Seaman Tami Md; Searfoss Linda A; Semlear Robert Dwight Md; Sgambati Carl Willard Md; Sgarlata Donna L; Sheehan Rebecca; Shin Joong; Shulof Jennifer Amy; Signor Connie J; Siniapkin George C Md; Sipperly Stephen F Do; Smith Marsha; Sorum Paul C Md; Spingarn David H Md; Steckley Renee E Rpa; Steckman David; Stein Rhonda Danielle Md; Stetzer Lee; Talma Theodore E Md; Taneja Sanjay Md; Tera N Hetrick-Platte Md; Thompson Dean A Md; Tietgens Sharon T Md; Tolentino Rommel M Md; Trapp Joseph J; Tumuluri Srilaxmi; Vasquez Deborah A Md; Verrico Ivelisse Ann Md; Vollmer Kelly J; Walders James D Md; Wales Danielle Patricia; Walker Michael Francis Md; Warner Deborah P; Watsky Jay G Md; Wayne Joseph T Md; Weissberg Robert A Md; West-Brown Janet; Wise Birute Marija Md; Wolff Michael Leonard Md; Wong Winston C Md; Wright Stuart B Md; Young Linda; Yousuf Asim Md; Zabinski-Kramer Kathleen Md; Zeltner Theodore Harold Md |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:1. Based on updated attribution lists, community needs assessments, and other data the PMO will ensure that appropriate safety-net PCPs are added to the PPS during OE periods. The inclusion of additional PCPs will assist in patient engagement to reach the 80% threshold.  |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Establish contractual agreements with participating primary care organizations to assure engagement of at least 80% of their primary care practitioners in this project.   |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Track primary care practitioner engagement in the project on an ongoing basis to assure contractual agreements are met.  |                     | Project         |               | Completed | 05/06/2016          | 09/30/2016        | 05/06/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found





**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text  |
|---|---|
| Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.   |   |
| 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. |   |
| 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.   |   |
| Use EHRs or other technical platforms to track all patients engaged in this project.  |   |
| Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).  | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |
| Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.  |   |
| 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.                                 |   |
| Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.  |   |
| Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.  | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |
| 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.  |   |
| Prescribe once-daily regimens or fixed-dose combination pills when appropriate.   | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |
| Document patient driven self-management goals in the medical record and review with patients at each visit.   |   |
| Follow up with referrals to community based programs to document participation and behavioral and health status changes.  |   |
| Develop and implement protocols for home blood pressure monitoring with follow up support.  | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |
| Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.  | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |
| Facilitate referrals to NYS Smoker's Quitline.  | This milestone will align with the BHNNY Midpoint Assessment Action Plan. |



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**Prescribed Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases. |                |
| Adopt strategies from the Million Hearts Campaign.  |                |
| Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.   |                |
| Engage a majority (at least 80%) of primary care providers in this project.   |                |

**Milestone Review Status**

| Milestone #          | Review Status   | IA Formal Comments  |
|----------------------|-----------------|---|
| <b>Milestone #1</b>  | Pass & Complete |   |
| <b>Milestone #2</b>  | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #3</b>  | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #4</b>  | Pass & Complete |   |
| <b>Milestone #5</b>  | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #6</b>  | Pass & Complete |   |
| <b>Milestone #7</b>  | Pass & Complete |   |
| <b>Milestone #8</b>  | Pass & Complete |   |
| <b>Milestone #9</b>  | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #10</b> | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #11</b> | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #12</b> | Pass & Complete |   |
| <b>Milestone #13</b> | Pass & Complete |   |
| <b>Milestone #14</b> | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #15</b> | Fail            | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |



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**Milestone Review Status**

| <b>Milestone #</b>   | <b>Review Status</b> | <b>IA Formal Comments</b>   |
|----------------------|----------------------|---|
| <b>Milestone #16</b> | Fail                 | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #17</b> | Fail                 | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #18</b> | Fail                 | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #19</b> | Fail                 | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |
| <b>Milestone #20</b> | Fail                 | The prescribed due date for this project was DY2 Q2. The PPS failed to meet the requirements for this project by the prescribed due date. |



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**✔ IPQR Module 3.b.i.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**IPQR Module 3.b.i.5 - IA Monitoring**

**Instructions :**



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**Project 3.d.iii – Implementation of evidence-based medicine guidelines for asthma management**

**✓ IPQR Module 3.d.iii.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

We have identified several risks of implementing this project, including creating evidence-based guidelines for asthma management. One of the risks is obtaining provider buy-in. Changing care protocols will require the identification of physician champions to lead the initiatives and a significant number of providers will be required to adopt the established protocols. We will also have to obtain significant provider buy-in in order to establish telemedicine services. Providers will have serious concerns about providing care without the patient physically present. Another impediment will be aligning initiatives with neighboring PPSs. With different demographics in the varying counties, designing a care model to meet everyone's needs will be difficult. Since the AMCH PPS does not have any identified Health Homes in our network, we will have to work with the surrounding PPSs on this deliverable as well. Finally, the inconsistency in technology from provider-to-provider will have to be addressed. To mitigate these risks we will, obtain provider and organizational buy-in, incentives will be provided for the use of established care protocols. Physician champions will be offered additional stipends as leaders within the PPS. Guidelines will be created and education will be conducted in order to engage providers using telemedicine technologies. When collaborating with neighboring PPSs and The Capital District Asthma Coalition, the providers will have to outline a mutually beneficial plan that helps achieve all deliverables in all areas, including identifying health home providers in our PPS region. With new care guidelines, unnecessary ER visits could be reduced, thus decreasing the expenses to the participating MCOs. Finally, incentives will be provided to organizations that upgrade/update their technologies to be more in line with their PPS partners.



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**✔ IPQR Module 3.d.iii.2 - Patient Engagement Speed**

**Instructions :**

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

| Benchmarks             |                        |
|------------------------|------------------------|
| Actively Engaged Speed | Actively Engaged Scale |
| DY2,Q2                 | 4,312                  |

|              | Year,Quarter             | DY2,Q1 | DY2,Q2 | DY2,Q3 | DY2,Q4 |
|--------------|--------------------------|--------|--------|--------|--------|
| PPS Reported | Baseline Commitment      | 3,881  | 4,312  | 3,881  | 4,312  |
|              | Quarterly Update         | 825    | 998    | 998    | 1,428  |
|              | Percent(%) of Commitment | 21.26% | 23.14% | 25.72% | 33.12% |
| IA Approved  | Quarterly Update         | 0      | 324    | 0      | 603    |
|              | Percent(%) of Commitment | 0.00%  | 7.51%  | 0.00%  | 13.98% |

**⚠ Warning: PPS Reported - Please note that your patients engaged to date (1,428) does not meet your committed amount (4,312) for 'DY2,Q4'**

**Current File Uploads**

| User ID  | File Type | File Name   | File Description                       | Upload Date         |
|----------|-----------|---|--|---------------------|
| curranj1 | Templates | 1_DY2Q4_PROJ3diii_MDL3diii2_PES_TRAIN_AMCH_PPS_3_D_III_FINAL_FOR_MAPP_UPLOAD_13949.xlsx | AMCH PPS_3_D_III FINAL FOR MAPP UPLOAD | 04/27/2017 03:30 PM |

**Narrative Text :**

For PPS to provide additional context regarding progress and/or updates to IA.

**Module Review Status**

| Review Status | IA Formal Comments   |
|---------------|--|
| Fail          | The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2,Q4 |



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**✅ IPQR Module 3.d.iii.3 - Prescribed Milestones**

**Instructions :**

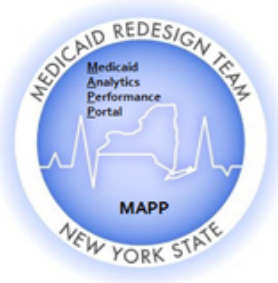
Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type                                     | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone #1</b><br>Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management. | DY2 Q2              | Project         | N/A   | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has agreements from participating providers and community programs to support a evidence-based asthma management guidelines.   |                     | Project         |   | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>All participating practices have a Clinical Interoperability System in place for all participating providers.  |                     | Provider        | <u>Practitioner - Primary Care Provider (PCP)</u> | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

**Providers Associated with Completion:**

Abigail R Watson; Agopovich Arsenio Md; Aitken Geri Lynn Do; Alarcon Gabriel Baldomero Md; Alegre Catalina; Allard Ingrid M Md; Anand Vinod Md; Aragona Sharon L; Arnold Hendrick Jr Md; Assevero Anna-Maria D Md; Azad Abul Kazam Md; Bakst Gary Md; Bala Virinchi; Baldini Gleda P Md; Barats Lev Leonidovich Md; Barillas-Arias Lilliana Md; Barraclough Nancy L Np; Barry Kelli Ann; Baselice Marino Md; Beauchamp Cara E Rpa; Bedford Sharon L Md; Bednarek Rebecca S; Bellin Joyce Lea Pa; Bello Scott C Md; Berman Jessica Dembitz Md; Bertram Michael C Md; Betancourt Nicole; Betit Alan; Bevilacqua Lisa Rose Md; Blatz Sarah J Pa; Borden Eric Charles Md; Borden Jennifer Lynn; Borrelli Karin; Bossolini Marybeth M; Braden Diane Beers; Brady Helen H; Brasch Mary L Md; Braungart Carol Fritz; Breen Martin Md; Brennan Tracey Lynn Md; Brennan-Jordan Nancy; Brilliant Rachelle I; Brown Sheryl; Brueggemann Christina Mchugh; Buff Christopher Md; Buhlinger Christine A Md; Burchell Randall Lawrence Md; Burke Michael Kevin Md; Busch Robert Steven Md; Busino William A Jr Md; Butterfield Rebecca C Md; Caiazza Margaret; Campagna Kristine J Do; Campbell Kathleen Kissane Rpa; Caramore William J Md; Cardiel Alexander Md; Carrasco Andrea Y Md; Carrelle Raymond J Md; Caulfield Patrick Francis Md; Cerone Jennifer Rebecca Boden; Chakraborty Ranen Kumar Md; Chan Cindy Hoying Md; Chaudhary Shawn Ahmad; Chauvin Rebecca L; Chava Prabhakar Rao Md; Cieszynski Veronica Eileen; Cioffi James Michael Md; Cirenza Emanuel Nicholas Md; Clark Catherine Nielsen; Clark Kristina Marie; Clark Melinda Beth Md; Clemente Kimberly; Cleney Holly K Md; Cleveland Byrd Md; Cohen Erik; Colman David Lawrence; Compa Kristen Leigh Md; Condy Angela G Md; Conlon Alan T Md; Conway Lillian Marie; Cossey Jason L; Costello Kevin B Md; Cotugno Steffani Do; Craig Maier; Culp Anita; D'Avella Wendy K; Daggett Brian George Md; Davis George Fabyan Md; De Waal Malefyt Stephen Karel Md; Deckelbaum Scott Howard Md; Delamater Jeffrey T; Denovio Bradley M Rpac; Diamond Courtney Beth; Diaz Miguel Remigio Md; Ditursi Mary Kathleen Williams; Dollard Michael Anthony; Donohue Robert; Dooley Kevin M Md; Doro Kristienna Martin; Dorsey Susan Serra Md; Dort Janice Beth; Dougherty Katherine; Downey Kathleen Md; Doyle Robin M Md; Drzymalski Zofia Wanda Md; Duff Thomas Edward Jr Md; Dvorscak Amanda Jayne; Dykstra Todd Bryan Rpa; Eaton Carolyn A Md; Eldeiry Samer S Md; Eldredge Daniel; Elguero Carlos; Enzien Ernest M Jr Md; Ernst Cheryl Elaine; Ethier Gloria; Farrell Claudia Sales; Farrell Richard Md Jr; Ferrando-Ross Pedro I Md; Fishel Stephen C Md; Flanagan Jean Ansari Md; Flatau Irene Ruth Md; Flik Anna Grattan Md; Flynn Dedra Md; Ford Bradley A Md; Friedrich Marcus Edmond; Fruiterman Mark L Md; Fruiterman Roy Md; Fusella Joseph Ii Do; Gandham Vijaya L Md; Gaston Shenelle R Md; Gaylord James Md; Gebhard Paul E Jr Md; Gelfman Rachel Dawn; Gelman Leonard M Md; Gerety Gregg F Md; Getzke Nancy L Np; Gildersleeve Rebecca Ann Md; Gilroy Shelley Ann Md; Glasgow Constance Lenore Mdpc; Glick Cheryl M; Goddard Bryan L Md; Goldberg Steven Marc Md; Goldsmith Christina Marie; Gomez-Di Cesare Caroline M Md; Gowdara Divakara Murthy Md; Gradner Jill A Md; Graney Sheela Md; Grant Stephen A Md; Greenblatt Carol Lynn Do; Greenblatt Michael J Md; Greenfield Country Medicine Pllc; Greenwald Lisa; Gross Eric J Md; Guice Stephanie M; Gupta Saaket Md; Guptill Gloria G; Gurralla Geetha Md; Haber Eugene Curtis Md; Halbig Robert Joseph Md; Haldeman Iii Richard J; Hanley Audra J Md; Harde Hasmuikh C Md; Hart Ashley Rose; Hawthorne Jami M; Hechanova Arnel B Md; Hennessy Elisa; Henson Jennifer T; Herman David L Md; Hickey Lynn Leitner Md; Hildreth Deborah A Rpa; Hobbs Patricia; Hogan-Moulton Amy E Md; Howard Elizabeth A Md; Hoy Christopher Dion Md; Hunter Philip Raymond Md; Ianniello Louis Md; Irani Danesh S Rpa; Jacobs-Friedman Alon B; Jacobson Kirsten Elizabeth Md; Jain Rajinder Md; James Philip C Md; Janowski Darcy A; Jeannie Ngygen; Jellinger Robert M Md; Johnson Charles A Do; Johnston Mary Md; Jorgensen Stephanie E Md; Jue Donald Md; Justa Shelley Md; Kanthal Marissa Loren; Karyn Marie Hughes; Kasarda Karen Marie Rpa; Katz Linda G Np; Kelleher Ruth Ellen; Kerr Hamish Alistair Md; Kineke Stephen Francis Md; Knapp George Sterling Md; Krizar Stephen Lewis Md; Kronick Gary Archer Md; Kucij Lyn Irene Rpa; Kudria Inna Md; Kumar Arbind Md; Lahtinen-Aley Kristina Marie Md; Larner Virginia Blake Rpa; Larsen Douglas P; Lauren T Siy; Lawson Jessica L; Lecours Laura Yates Md; Lee Arthur Farren Md Pc; Lee Josephine M Md; Lemanski Paul Md; Lemons Lorraine S Do; Leonidas Leonard Al Md; Light Deborah I; Lindstrom Jennifer E Md; Litts Warren C Jr Md; Livolsi Laruen L; Locke Elizabeth Anne Md; Ludwig Samantha Md; Mack Brigid; Mack Kristin Lake; Madala Padmaja Md; Malin Julia Md; Malone Anthony F Md; Mance Joan M; Manjunath





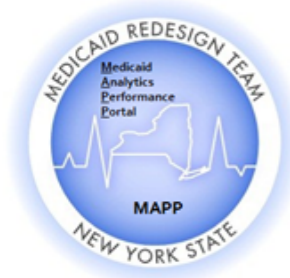
# New York State Department Of Health

## Delivery System Reform Incentive Payment Project

### DSRIP Implementation Plan Project

#### Albany Medical Center Hospital (PPS ID:1)

| Project Requirements<br>(Milestone/Task Name)   | Prescribed<br>Due Date | Reporting<br>Level | Provider Type                                     | Status    | Original<br>Start Date | Original<br>End Date | Start Date | End Date   | Quarter<br>End Date | DSRIP<br>Reporting Year<br>and Quarter |
|---|------------------------|--------------------|---|-----------|------------------------|----------------------|------------|------------|---------------------|--|
| Kallanna Md; Marici Kathleen Md; Marinello Anthony James Md; Marshall Robert Andrew Md; Marshall Ryan; Marthy-Noonan Anne K Md; Martin Jill; Martin Kristen Hedger Md; Martorana Sebastian Vincent; Mary Patricia Shierly; Matott Heather Melissa; Mccarty Kaitlin Elizabeth; Mcgaffin Christina E; Mcgarry Karen A Rpa; Mckeeon Elisabeth Waterman Md; Mckinney Sue Peterson Rpa; Mead Daniel H Pa; Mekosh Susan Lynn; Meltz Theresa Ann Rpac; Merecki Eugene Karl Md; Merkhan Samuel Kabriyel Md; Merriman Joann; Meyer Vincent Edwin Md; Michelena Karen X; Mifsud Mindy; Mihindukulasuriya Joseph C Md; Millea Kerry; Miller Cynthia H Md; Mirza Shahida Parveen Md; Mitkoff Nathan B Md; Mitnick Neil Craig Md; Mitta Swatantra K Md; Mondelo Doreen Perez; Monkash Jeff Ira Md; Monserrate Nicole Marie Md; Montelone Kimberly Ann Np; Moran Antoinette Collins Rpac; Morgan Ayman Md; Morgan Lacey Elizabeth; Morin Michael P Md; Muller Susan Marie Md; Murphy Christine M Md; Murphy William Patrick Md; Murray Amy J; Mustafa Marianne A Md; Musto Ronald V Md; Navarette Kristen Alexandra; Navarro Brian Scott Md; Neilley Henry Md; Nemith Lindsay Mumford; Newton Scott; Nguyen Hung Dinh Md; Nicholson Timothy Joseph; Nielson Robert P Jr Md; Nolan Florence A Md; Norton Neal David Jr Rpa; Noyes Kimberly; O'Brien Joanne Elizabeth; O'Brien Michael F; O'Loughlin Suzanne; Obeid Leila Ann; Oke Benjamin; Olszewski Peter; Omeara Shannon Lauren; Orsi Richard A Md; Osborn Kyle Thomas Md; Owen Claudina; Pachucki Kevin Christopher Rpa; Paeglow Robert John Md; Parent Colleen E Md; Parikh Nita S; Pascual Arsenio George Md; Patel Umesh; Patil Nagaraja N Md; Pelnik-Fecko Tricia Ann Md; Petraccione Lisa F Rpa; Pezzulo John Phillip Md; Phelan Carol Beberwyk; Pierce Jean Catherine Rpa; Pomichter John Stanley Md; Pope Ronald James Do; Potratz Meagan A; Price Darin Michael Md; Price Marc David Md; Pride Boone Janice Md; Puthuparampil Beulah J Md; Quarrier John V Md; Quinn Barbara Hunter; Rabbin Linda S; Raggs Hope G; Ramani Ananthakrishnan Md; Raveendranath Brooke A; Ray David Allan Md; Reed Monica Renee; Reider Jacob Michael Md; Richman Charles H Md; Ricker Kerry Elizabeth Do; Rienzi Peter Anthony Md; Rios Zandra M Md; Robinson Kristen; Roche Sean Patrick Md; Rodriguez-Goodemot Renee B Md; Ronan Alisha Lynn; Rose Jennifer; Rosenbaum Elena; Rosenberger John Daniel Md; Roske Julia H Rpa; Rovere Rena Marie; Russell Jennifer Brooke; Rutter Ann; Sacco Joseph P Md; Salimah Dhanani Md; Saluja Ravinder Kaur Md; Samedov Nikolay Md; Samuel Jency Thomas; Santoro Eileen; Saperstone James D Md; Saunders Patricia V Md; Sazon Alexandr; Sazon Tatiana; Schnakenberg Eric C Md; Schneider Nicole Marie; Schnide Kenneth Ben Md; Schottler-Thal Carrin Md; Schumacher Thomas C Md; Schwartz Kenneth Md; Schynoll Gerald Klaus Md; Seaman Tami Md; Searfoss Linda A; Semlear Robert Dwight Md; Sgambati Carl Willard Md; Sgarlata Donna L; Sheaffer Margaret A; Sheehan Rebecca; Sherwood David Edward Md; Shin Joong; Shulof Jennifer Amy; Signor Connie J; Siniapkin George C Md; Sipperly Stephen F Do; Sirico Theresa A Do; Smitas Catherine Malone Md; Smith Marsha; Sonnekalb Michael P Md; Sorum Paul C Md; Spindler John B Rpa; Spinelli Karen Ann Md; Spingarn David H Md; Steckley Renee E Rpa; Steckman David; Stein Rhonda Danielle Md; Stetzer Lee; Stevens Arthur L Md; Strader Stephen Earl Md; Talma Theodore E Md; Taneja Sanjay Md; Tera N Hetrick-Platte Md; Tetreault William Robert Md; Thompson Dean A Md; Thorn Lisa Marie Md; Tietgens Sharon T Md; Tolentino Rommel M Md; Tomiak Henry P Jr Md; Tonneau Benoit Md; Torre Jenny Ann; Trapp Joseph J; Tumuluri Srilaxmi; Vachon Cary Ian; Vachon Francois Marc Andre Md; Vasquez Deborah A Md; Verrico Ivelisse Ann Md; Viola Theresa Md; Vitale Alex Nathaniel; Vollmer Kelly J; Walders James D Md; Wales Danielle Patricia; Walker Michael Francis Md; Warner Deborah P; Warszawa-Ambros Maryla A Md; Wasniewski Holly L Md; Watsky Jay G Md; Wayne Joseph T Md; Weissberg Robert A Md; West-Brown Janet; Winchester Susan B Np; Wise Birute Marija Md; Wolff Michael Leonard Md; Wong Winston C Md; Woodruff Barbara A Rpa; Woods Margaret Mary Md; Woods Norbert J Md; Wright Stuart B Md; Yadegari-Lewis Nasrene Md; Yan Richard; Young Linda; Yousuf Asim Md; Zabinski-Kramer Kathleen Md; Zeltner Theodore Harold Md; Zimring Debra Carol Md   |                        |                    |   |           |                        |                      |            |            |                     |  |
| <b>Task</b><br>All participating practices have a Clinical Interoperability System in place for all participating providers.  |                        | Provider           | Practitioner - Non-Primary<br>Care Provider (PCP) | Completed | 09/07/2015             | 09/30/2016           | 09/07/2015 | 09/30/2016 | 09/30/2016          | DY2 Q2                                 |
| <b>Providers Associated with Completion:</b>  |                        |                    |   |           |                        |                      |            |            |                     |  |
| Abdelhamid Ayman; Abdullah Mishal; Abel-Bogner Lisa; Abraham Christa Rose; Abraham Lisa Puthuparampil; Achar Naveen Md; Adamo Matthew Armand Md; Adetayo Oluwaseun; Adger-Antonikowski Angela; Adjara Jennifer Ekwutosi; Adsit Mark G Md; Afroze Farzana; Afsarkeshmiri Armin Md; Akujuo Adanna Chinaka Md; Akuoko Nana; Al Kawass Anas; Alapati Sailaja; Albright Lauren Ann; Alderisio William George Md; Alger-Mayer Sharon A Md; Ali Jameel; Allison Stefanie L Md; Allmendinger Nikki; Alpaugh Craig Alan; Alshaer Khalil; Ambati Shashikant; Amin Hetal Thakor Do; Amin Hiral Natwarlal Md; Amory Colum; Amsden Tracy Rpa; Amyot Edmond Md; Andrejuk Tomasz Md; Andriakos Peter George Md; Ares Carlos Alfredo Md; Argoff Charles E Md; Arunakul Nathapong; Asare Kofi Sarkokie; Asher Shellie Lynn Md; Askew Allyson Ann; Astorga Rakel Maria; Ayre Harvey Brandon Md; Azam Nyla Khalid; Bailey Kelly Ann Np; Bailey Laura M; Baker Judith A; Baker Kenneth J Md; Bakhos Charles; Bakhru Usha H Md; Balkoski Victoria; Balog Amy; Baran Andrij Ostap Dimitry Md; Baranov Dmitri; Barba Anne Lauren Phd; Barcomb Timothy F; Barlin Joanne Nuqui; Barnert David M Md; Bartfield Joel M Md; Bartholomew Catherine R Md; Batool Asra; Bauer William M Md; Bayoumy Sayed Mahmoud Md; Bedinotti Ingrid; Beegle Scott H Md; Beer Ruth Md; Beesley Bruce A Md; Bekan-Homawoo Brigitte Edwige; Bell Joseph William; Belova Natalya Md; Bennett Edward V Jr Md; Bentley Tyrone; Berger Ashleigh; Berkovich Betsy; Berkowitz Richard; Bernad Jason Edward Md; Bernardi Shaina; Berry Wendy J; Betts Maia; Betzhold James John Md; Beyer Robert; Beyer Todd David Md; Bhullar Ravneet; Bielawa Robert A Rpa; Birdsey Karen Diane; Birnbaum Eliot L; Biscossi Michele Lee; Blackburn Chame Curtis Md; Blackington Colette C; Blaisdell Lauren Mackenzie; Blinkhorn Richard John Jr; Bloomfield Naomi Terry Md; Bloss Christopher A Md; Bock Devon E Md; Bock Katja Elizabeth Md; Boenau Ioliene Beth Md; Boguniewicz Anna B; Bombard Tiffany; Bonner Lori Lee; Boone Cheyenne Allen; Boss Donna Jean; Boulos Alan Samuel Md; Boulos Maria Theresa Bajos Md; Bourke Diane A Md; Bovee Norman; Boyar George Md; Boyd-Smith Molly; Bradley Nina Grace; Brasch Robert C Md; Bravo Enrico A; Bredwood Jacqueline E; Brendese Stephen C; Brewer Brandy Yvette; Britton Lewis W Iii Md; Brodsky Laura F; Bromley Nicole; Brooks Timothy Alan Md; Brownell Donald N; Bruce Victor G; Bruno Natalie; Bryan Richard; Bughrara Nibras; Buhac Jean C; Buhac John Md; Bulford Lionel A Dds; Bunch Marjorie; Burdick Jeffrey J Md; Bushart Matthew Thomas; Buzzola Rino Alberto; Byrne William Md; Byrnes Christine M; Byrnes Crystal; Cabuhat Aleta; Cadigan Beth Md; Calistri Christine Jane Np; Cameron Jeffrey Stuart Pa; Camp Rodney L Md; Campito Mitchel A Md; Capek Lucie Md Plc; Capello Seth Alexander; Caracci James Robert; Card Harold George Md; Cardinale Carmen; Carl Allen L Md; Carlin Kristine Marie; Carlson John A Md; Carney Michael; Carr Catina; Carruthers Jay; Carsello Carrie; Carsello Jeffrey; Carsillo Vincent James Ii Do; Casale Charles Vincent Md; Case Christopher John Md; Casivant Belinda M; Castma Naika Clara; Caulfield Cora Lynn; Ceballos Jeanne Forziat; Ceccucci Janice Lynn; Celestin Jocelyn Md; Celmins Dzintra Freimane Md; Cerda Jorge Md; Chalmers Paul Md; Chandolias Nikolaos; Chang Andrew Md; Chang Kit Laura Annelise; Chang Robert Dds; Chang Theodore Tuan Md; Chao Jerome Donald Md; Chase Michael P Md; Chaudhary Ayesha Muriam; Chaudhary Faisal Rashid; Chaudhry Rafia Ishaq; Chaudhry Sanjay Md; Chernoff Daniel Michael Md; Chismark Anthony David; Chopra Amit; Chopra Rupal Md; Choudhary Madhuchhanda Md; Chow Yvonne; Chowdhery Naseer Amd; Christian Patricia S; Chu Alan L Md; Ciccarelli Blair; Cirilla Dennis Jacob Ii Do; Clark David A Md; Clark Steve Daniel Pa; Claus Jeffrey K; Clinton Henry Louis Jr Md; Coffman Megan; Cohen Donna Marie; Coiteux Yvonne C; Colaneri Jean; Cole Peter Ramon Md; Coletti Jamie L; Collins Kevin P; Coloprisko Sara Ann; Comar F Dayle Md; Condy James Dearien Jr Md; Conley Thomas Eugene Md; Constantino Jorge Lucas Md; Conti David J Md; Cooley Christine; Cooley Michael Robert; Coombs John Michael Christopher Md; Cooper Benjamin Z Md; Copeland Terese Agnes Md; Cornell Kathleen; Cornish Chad Matthew; Cosgrove Ellen F Md; Cote Amanda Pauline; Crnkovic Anica Md; Crosby Erin Claire; Crosier Amanda; Cullen Kathryn; Cummings James J Md; Cunningham Lynn A; Cutler Amos B Md; Cutry Anthony; Czajka Ellen M Md; D'Arcy Allison T Rpa; Dadian Nishan; Dahl Jeanne A; Dailey Michael Winter Md; Dakakni Tarek; Dalfino John Charles; Daly Pamela Lynn Dpm; Damore Dorothy Taylor; Daniela Iulia Sima; Daoui Rachid; Daraban Nicoleta Md; Darling Ralph C Iii Md; Davison Edwin Allen Jr Md; Dawkins Earl Anthony Rpa; De Arup Md; De Elise J B Md; De Filippo Jennifer L; De Lair Paula Crehan; De Vito Michael A Md; Deanda |                        |                    |   |           |                        |                      |            |            |                     |  |



**New York State Department Of Health**  
**Delivery System Reform Incentive Payment Project**  
**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status | Original Start Date | Original End Date | Start Date | End Date | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|--------|---------------------|-------------------|------------|----------|------------------|----------------------------------|
| Abelardo Md; Dearth Christine Cillis Md; Debergh Marc Taylor; Deblock Heidi Frutchy Md; Deeb Erin M; Defranco John Md; Defreest Lori; Del Giacco Desmond Rudolph Md; Delago Augustin J Md; Demaree Julie E Rpa; Dempsey Stephen J Md; Denio Diana M; Deroo Andrew; Desai Nimesh Shashikant Md; Desantis Sara E; Desemone James Md; Deserre Steven Francis Cnm; Desimone Cheryl Ann Md; Deteso Damon Md; Devejian Neil S Md; Dexter Martha Evelyn; Dexter Scott C Md; Diaz-Parker Carl E; Dicerbo Nancy; Dick Ronald Larrabee; Dickson Matthew J Md; Digiovanni Louis A Md; Dirisio Darryl John Md; Dirusso Michael T; Dittes Paul; Dodd Debra L; Dodd Jack Edward Jr; Dolen Michael; Dolinsky Christophe; Donnarumma Robert; Donovan Sean; Dorfman Annette; Doti Christopher Warren; Doyle Melissa M Csw; Drzymalski Jolanta; Duncan Luke Joseph; Dundon Renee Rpa; Dunkerley Christopher J; Durie Nicole; Durphy Jennifer; Duthaler Todd Douglass Md; Dweck Laurie Jo; Eager Jeremy Morgan; Eames Frederick Md; Eastman Michelle Lee; Edge Walter E II Md; Edmond James A Md Pc; Ehlers Melissa Anne Md; Eisele George Md; Elacqua Mary S; Eldredge Amy Beth; Ells Peter Francis Md; Ellwood Rebecca; Elsagga Elizabeth; Engelhart Heather; Englander Meredith J Md; Ennis Corey Elizabeth; Eromo Ersno Md; Espiritu Marvee Gay Santiago; Esposito Russell J Do; Estrada Fabiola Alisson; Etekal Yashar; Evans Christopher Johns; Evans Mary Teresa; Evans Sarah M Rpa; Fabian Thomas; Falardeau Jodi L; Falk Arthur N Md; Fantauzzi John Patrick Md; Farah Rebeka Rpa; Farnsworth Wayne J Md; Farooqi Wiqar; Farren Seth Timothy; Fay Mary E; Fazzio Lydia Olympia; Fear Philip J Md; Fein Lawrence Md; Fein Steven Md; Feinberg Zachary Allan; Ferdinand Francis Darrell; Ferrando-Dehtiar Natalia Victorovna; Ferrara Justin Michael; Ferrillo Martin; Field William Edward Li Md; Filanova Vincent Dds; Finger W Edward Jr Dpm; Finn Daniel Joseph Md; Fiore Alicia J Rpa; Fiorini Jennifer; Fisher Hugh A G Md; Fisher William Thomas Md; Fitzpatrick Michael Md; Flax Harold; Flood Christopher Daniel Md; Foley Jeffrey A; Folger Walter H Md; Ford David L Md; Ford Jockular B Pc Md; Ford Patricia Ann Md; Forget Jeffrey; Forrest George P Md; Foster David E; Foulke Llewellyn; Fox John M Dds; Foyt David Md; Francomano Thomas John Md; Frank Alex Harris Md; Franklin Peter Augustus Md; Frawley Bridget Kathleen; Freeman Beth E; Frey Michelle West; Friedman Cynthia Susan; Frisch Adam Md; Fritz Howard Philip Jr Md; Fritz Jeannene; Furst Branko Md; Gainor Jonathan P Md; Galati Lisa T Md; Galay Igor; Gandarillas Jesus M; Garbarino Kathleen Marie; Garcia Juan Carlos Md; Garcia Medina Lymaris; Garla Sreenivas; Gearwar David C; Geary Sean Patrick; Geis Gina; Gennari Lindsay; George D Waterman Jr; Gerber Allen Md; German John William Md; Gicewicz Adam; Gilbertson Dorothy; Gildener-Leapman Neil; Gill Tarig N Md; Giramonti Karla Michelle; Giuffrida Lashawnda L; Glaser Jordan; Glaser Lewis A Md; Gleason Mary Kathryn; Gleason Zachary M; Glozman Alexand Josifovich; Gobunsuy Romel; Gokey Ellen L; Gold Daniel C Rpa; Goldberg Barry Stuart Md; Goldenberg Kelly A Cnm; Goldin-Denio Margaret; Goodman Thomas L Md; Gorczyński Christopher Md; Gordon Peter Eliot Md; Gordon-Stacey Carrie; Gorham Sara; Gosnell Laura Catherine; Goyer Richard Paul Jr Md; Gray Robin Mary; Graziano Pauline D; Green Elizabeth Anne; Greenblatt Daniel Edward; Greene Elliott Stephen Md; Greene Julie; Greenspan James Scott Md; Greer Alyssa Rpa; Gregg Michael; Gresseau Shirley Md; Gross Julia M; Groudine Scott Bradley Md; Gruenthal Michael Md; Gsell Jennifer Lee; Guidarelli Heather Mary; Gujral Maninder S Md; Guldenstern Erin; Gupta Vinita Md; Gupta Vinod Kumar Md; Gusten William M Md; Halsdorf Courtney Soon Hee; Hamilton Christophe; Hamilton Jennifer; Hanakova Marcela Md; Hansen Philip; Hanspal Era; Harnick Robert Md; Haroon Omer Ahmad; Harrica Rebecca Ann; Hart David Ernest Md; Hasnain Mujtaba A; Hassan Jones Lynn B; Hassett Stephen G Md; Hausman Julia H; Hayes Jennifer; Hayes Joseph Robert Md; Hazen Gordon Rpac; Heasley Paul Edward Md; Heather Coe Pa; Hedden Jeffrey Louis; Hegel Rebecca; Hellman Lance I Md; Hellwitz Frederic Jon Md; Hendrick William Md; Henry Clarence Bruce Md; Heran Meghan E; Herlihy Kevin J Md Pc; Herr Allen Michael Md; Herzog John Christopher; Hettrich Amy L Rpa; Hicks Steven D; Hida Sven; Hinds Marcel Eldon Md; Hindson David Fessler; Hinerman Rachel Sue Md; Hirt Deborah; Hodes Jamie L; Hoffert Eugene Joseph Md; Hoffman Jill Diane; Hoffman Loretta; Hogan William James Dds; Hollands Celeste Marie Md; Homan Suzanne Michelle; Hoosier-Paty Dawn Michelle; Hoover Eric Md; Hopkins Susan; Horgan Michael Joseph Md; Horn James F Md; Hosannah Hilton O II Md; Hubbell Jr Robert; Hughes Cindy Weiss Md; Hughes Peter M Md; Hughes Richard A Jr Md; Hughes Robert John Md; Hunter Lauren A Rpa; Huss Sara Abigail; Hutchins Elizabeth Ann; Hutton Jennifer Dpm; Hyde Natalie Ann; Idelchik Gary M; Ilowit Emily Katharine; Infantino Benjamin; Ingolia Michael; Irwin Robert W Md; Jacob Rana B Md; Jacobs Fred I Dpm; Jacobs Hugh Frederic Md; Jacobs Laura May; Jafri Mokarram H Jr Md; Jagoda Albert G Md; Jaitovich Adolfo; Jameson Gerardus L Md; Janasek Karolina; Janssen Daniel James; Jeannine Marie Rother; Jeffrey Raouf Ridha; Jennifer White; Jennings Timothy A; John Delmonte Jr; Johnson Abigail Ruth; Johnson Sheena Marie; Jones David M; Jones Richard Eaton Dpm; Jones Stephen Paul; Jorgensen Shawn P Md; Jorgensen Todd Robert Md; Joseph-Belfort Alison; Judge Erin M; Judson Marc A; Kachurek David P; Kafilludi Ronny; Kaiser Laura Marie; Kallin Kimberly E; Kamenir Steven A Md; Kandath David D Md; Kane Tabitha; Kaplan Eugene Daniel Md; Karo Ronald Solomon Md; Kaslovsy Robert A Md; Kathryn Hogan; Kaw Pamela Md; Kayastha Sanjiv Md; Kearney Andrew S Rpa; Keating Lawrence; Keefe Joan Marie; Kelling Timothy Scott Md; Kely Robert Walter Md; Kennedy Jeffrey; Kennedy Patricia Rae Md; Kennedy Sean Michael Md; Kennedy Thomas M Md; Kenning Tyler James; Kent Kenneth; Kepner Heather Marie Np; Kercull Robert George Md; Kesner Rubin Do; Kestler Margaret; Kevin Jones; Khalak Rubia Md; Kiff Jane; Kiley Kevin; Kim Kelly-Ann; Kim Richard Lee; Kimball Randall Mark; Kimble David Michael Md; King Charles Christopher Md; Kirkpatrick Yulia Alexandrovna; Kishore Pankaj Md; Kittell Jennifer; Knoeller Amy Eileen Md; Koeppen Arnulf Md; Kogan Barry Allan Md; Kogan Yelena Aleksandrovna; Kondo Nicholas Ivan; Koren David Joel Md; Koumanis Dimitri; Kozak Craig Robert; Krampert Ryan; Krishnakumar Dundappa Hongalgi Md; Kuehler David H Md; Kufs William Michael Md; Kuhar Gordon N Md; Kumar Sudha Md; Kuo Ramsay; Kutzer William M; Kwon Anne; Laddis Theodoros Md; Lafif Zeshan; Lafortune Yarnell; Lagrave Brent Foster; Lahut Barbara K; Laity Sandra Ann Dpm; Lamar Stacey Anne; Lange Amber L; Lange Josef F; Langford Stacey; Laplante Steven P; Larosa Joseph M Md; Larow Catherine Mary; Larrabee Erin V; Larsen Karen; Larson Una B; Laruffa Gia M; Lasky Charles W Md; Lau Kevin Md; Laufer Andras Laszlo Md; Lavelle Daniel Thor; Lazarus Sol; Lechowicz Andrzej Jan Md; Lee Edward Choongho Md; Lee Hwa; Lee Jamison; Lee Joong Md; Lee Sharon; Lefkowitz Andrew Md; Lefner Jennifer; Leifer Ann; Lenihan Michael William Md; Leung Anna; Levine Carolyn Robbins; Li Chunhua; Libruk Tara Kristine; Liebers Edward Martin Md; Limes Britton J Md; Lingat Marie Cheryl P Md; Lisinschi Adriana; Liss Allison; Listman James A Md; Litynski James; Liu Baogang; Lloyd Adam Taylor; Loeber Russell; Long Heather Md; Lopez Janeen Ellen; Loytra Oleksiy; Lu Ping Md; Lubna Valliani; Lucas Judith Anne Md; Lukowitsky Mark; Lundberg Lori A Dpm; Lundgren Brandon Michael; Lynch Patrick; Lynch Timothy Joseph Francis Dds; Lynch Timothy Michael Md; Lyons Trent William; Lyubarova Radmila; Maben Wayne Charles Md; Mabry Myra A; Macdowell Richard Taylor Md; Maclellan Allison M; Madigan Heather; Maisel Barry Oscar Md; Maitland Ceceleta Y Md; Malamood Howard Md; Malhotra Anuj; Mami Ahmed; Mandato Kenneth Md; Mane Archana Md; Manny Tara Amanda; Marchland Maurice E; Marici Edward M Do; Marsh Catherine Louise; Marsh Patricia L Rpa; Marshall Jonah Scott Md; Mary Annette Collins; Masters Cindy N; Mastrangelo John Armand; Mastrianni David M Md; Mathai Gimi; Matthew I Stein Md; Matthews Elizabeth Susan; Matties Regina K; Mavashev Mikhail; Maxwell Steven J Do; Mazur Jordan Thomas; Mccarthy Brigid; Mccartney Jeffrey Robert; Mcchesney James D Md; Mccullough Andrew Md; Mcgork James Rpa; Mchugh Brian Anthony Md; Mckee Mary Ann; Mckenna Dennis Patrick Md; Mcmahon Laura; Mcmahon Scott F; Mcwhorter Lauren; Meagher Colin Patrick; Medarov Boris I; Medina Christopher; Mehta Manish Md; Mehta Swati; Melayed Daniel E Md Pc; Melius Jonathan Robert; Memmelaar Angela R; Metwally Mark; Mian Badar Munir Md; Micca Emily S; Michailides-Townsend Sally M; Michalek Ann V Md; Militar Epifanio Iguidez Md; Millar Robert David Md; Miller Jennifer; Miller John; Miller Kristin M Rpa; Miller Stuart J Jr Md; Millett Jeanne Marie; Millett Morgan; Miron Carrie Beth; Mishra Pragnyadip; Mitchell Barry W Md; Mitchell Nancy Lynn; Mohammad Eitlajjar; Mohsin Intikhab; Molho Eric Steven Md; Moll Peter Raymond; Monaco-Brown Meredith; Mongan John Patrick; Mongioli Russell J; Monroe Richard; Monroy Prado Mauricio Ricardo; Monzur Mohammed Ali Md; Mookherjee Sulagna Md; Morawski John L Md; Morelli Amy M Rpa; Morere Donald R Jr Md; Morgan John; Morley John N Md; Moses Eric Daniel Md; Mosher Seana L Rpa; Mouzakes Jason Md; Mueller Benjamin; Mueller Kelly; Munshi Upender Md; Murnane Matthew J Md; Murphy Kathleen A Cnm; Murphy Sean M; Murray Brian P; Murray Sherrie L; Mursi Hanan; Musuku Sridhar; Nabozny Geraldine M; Nagaraj Sharita; Nappi Anthony Gerald Md; Narayan Ananth; Narayan Sarah; Nautiyal Amit Md; Nazeer Tipu; Nelligan John; Newey Laura Rebecca; Newman Lisa C; Newsome Donna; Nichol Carrie Burgess; Nichols Mary Kay; Nickels-Nelson Gina Marie; Nietsch Hubertus Heinrich; Nigam Ankesh Md; Nigam Sujatha A Md; Nijjar Gurkirpal S Md; Noonan Jessica; Nordhauser Micaela Urbano; Northrop Jennifer; Northrup Patricia Ann; Norton Mary Alice; O'Connor Emily Marie; O'Leary Anthony M Md; O'Meara-Zimmer Kimberly J Np; Oberg Gary David; Oconnor William Walter Md; Oechsner Helena Md; Ogbuji Princewill O Md; Oliveri Courtney; Olszowka Angelique; Olszowka Joseph V Dds; Oretsky Dawn L; Ortiz Gordon Michael Md; Ostrov Arthur H Md; Ostrowski Kathleen Lanka; Packard R Andrew Md; Paddock Bradley H Md; Pahwa Suneet Singh; Palmer Michelle N; Palmieri Philip J Md; Palms Jo-Ann; Pan Phillip Md; Pani Saroj Md; Papaleo Rafael Md; Paravella Dana W; Parenti |                     |                 |               |        |                     |                   |            |          |                  |                                  |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Anthony Ryan; Parikh Reena; Parikh Shirish Jayant Md; Parnes Steven M Md; Pasha Muhammad Asghar Md; Pastena Gaetano Thomas; Patel Ashit; Patel Reemaben Rajendrabhai; Patel Shailesh Rasiklal Md Pc; Patterson Norman W Md; Paty Philip S K; Paul Jeffrey Thomas Md; Paulsen Rana; Pauze Daniel K Md; Pauze Denis Robert; Payne Andrew; Peace Kristen; Pearlstein Gary E Md; Pelesz Jennifer; Penc Stanley F Md; Perl Lawrence Mark Md; Peter Elliott Fisk; Petrie Brandy; Petronis Karen; Phelps Carlton Md; Phelps Kenneth R Md; Philbin Edward F Md; Phillips Roland Turner Md; Phillips Victoria J; Phung Quentin Md; Pieterse Portia Lucille; Piliitsis Julie Georgia; Pilpel Sylvia E Md; Pinheiro Joaquim Manuel B Md; Pinheiro-Neto Carlos Diogenes; Pinto Dorcas Boahema; Plotkin Richard Eric Md; Pluto Luke A; Poli Kim Ann Md; Polynice Beatrice Ms.; Poon Edward; Porter Allison Kay; Posada Jose Gonzalez Md; Potenciano Angelo; Pozniakas James T Md; Pradhan Elizabeth; Prasad Manju Md; Pregont Scott Michael; Prichett Janice; Provost Justin Alan; Przybyla Adrian M; Puranik Arun Md; Purcell Peter F Md; Pyle Bert William Iii Md; Python John Patrick Md; Qian Jiang Md; Qualia Cary Michael Md; Qualtere-Burcher Paul D Md; Radu Gabriel; Raja Asim Nazir Md; Ramirez-Zamora Adolfo; Ramos Glenn Patrick; Rangwala Sakina Md; Rashid Numan; Rasouly Mai Mona; Rasouly Yama; Rathert Nicholas; Rau Stefan Thomas; Reed Thomas; Reed-Esper Sarah Nicole; Reid Derrece Kaliesha; Reilly Michael J Md; Renaud Elizabeth; Reutzel Laura; Reynolds Frederick D; Rezak Kristen; Rhymaun Rachel E; Ribons Lisa Ann Do; Rice Bradley Michael; Richter Seth Joseph Md; Riddick Linda M Md; Rieker Judy J; Rifenerick Mary Ann Carol; Rijhsinghani Asha; Rios Angel Md; Rischert Bruce; Ritaccio Anthony Louis Md; Rittenhouse Kathy; Rivard Donald J Md; Roberts Craig Edward Md; Roberts Jordan Ms.; Roberts Kevin Wilson Md; Roberts Maureen E Md; Robinson Lawrence W Jr Md; Robinson M Brigit Np; Rodenmayer Wade Harold Rpa; Rodrigue Raymond A Rpa; Romer Richard Alan Md; Romero Jenny Md; Rooney Danielle Marie; Rosario Frances; Rosas Kevin E Md; Rosati Carl; Rosen Jonathan M Md; Ross Jeffrey S Md; Roth Malcolm Z Md; Rothman Deborah; Rowden Adam Kendall Do; Rubin Abigail Ann; Russo Thomas; Sacco Joseph D Md; Safa Radwan Dr.; Salenger Page Valery Md; Salgado Marlon; Sama Jalin Md; Samelson Renee Md; Samson Susan Marie; Samuels Sharon B Md; Samy Sanjay Anantha Md; Sanchez Javier Luis Md; Sandbach Katherine Ashley; Sanders Alan M Md; Sandison Michael Rl Md; Sandler Steven Md; Sani Farzad Dds; Santell Eric R; Santella Donald Richard Md; Santos Roberto; Saqib Najmus Md; Sarah G Fox Dds; Saratoga Ear & Sinus Surgery; Sarchino William J Dpm; Sarmiento Augusto Salvosa; Saunders Richard A Md; Savage Colleen Dunn Md; Scardillo Judith; Schaefer Bianca; Schafer William R; Schick Karen Wynne Md; Schlossberg Howard Robert Md; Schneider Jennifer L Rpa; Schnell Jessica Mae; Schoch Kim Elizabeth Dale; Schoen Fredric S Md; Schoenfeld Barton Md; Schongar Marie Antoinette; Schulman-Marcus Joshua; Schuster Michael Edward; Sciacca Cheri; Scialabba Fred P Md; Scordino Jessica; Scott Rachel; Scott Walter; Seguinot Elizabeth Ms.; Semenoff David L Md; Senick Joyce M; Shafer Carolyn H; Shahata Hani L Md; Shapiro Lee S Md; Shapshay Stanley M Md; Sharlow Joan G Rpa; Shaver Jeannelle M; Sheehan Kelly L; Sheehey Donald; Shepard Leigh A; Shepard Timothy Folsom; Shin Catherine Hekyung; Shinaishin Mamhoud Akif; Shkolnik Boris; Shou Jason Dr.; Shur Natasha; Sidhu Mandeep Singh; Siebeneck Aaron J Dpm; Siebeneck Hillary; Silk Paul R Md; Silver George E Md; Silver Steven M Md; Silverman Eric Ross; Simmons Richard J; Simon Elisabeth; Simor Ginger Md; Singh Jitendra; Singh Tejinder P Md; Siskin Gary P Md; Slatch Carolyn Jean Md; Smith Brendon; Smith Derek W; Smith Janeen A; Smith Jennifer; Smith Rachel E; Smith Thomas Clinton Md; Smith-Foy Barbara; Snyder Howard Md; Snyder Martha; Socaris Sophia Md; Sokaris Stephen John Md; Solga Matthias; Sonn James Jin Md; Sood Vinay Md; Sorel Bertrand; Southworth Krista Rpa; Sparano Antonio Md; Sparbeck Nicole; Spear Alison Heather Md; Spektor Boris Md; Spencer Taylor; Spooner Elizabeth M Dunn; Stacey Sarah R; Stain Steven Md; Stam Katherine L Do; Stefanova-Stephens Nadejda; Stein Julie Ann; Steindler Jason Harrison; Steiner Anna; Stepan Jovanna; Stephens Christopher S Rpa; Stephenson Lisa; Stern Jeffrey H Md; Sternbach Yaron Md; Stoecklin William; Storey James R Md; Strauss David Noah Md; Stutz Helen Rita Md; Su Xiao; Subik Maria; Subudhi Manoj Kumar Md; Sugent-Gray Linda J; Sundaram Vishalakshi; Shawna Debonis; Taccad-Reyes Sandra Carlos Md; Tadros Michael; Tafen Wandji Marcel; Taggert John B Md; Tai Muhammad Siddique Md; Talbot Jean F; Tan Henry T Md; Tan Josenia Narcisa Mailed; Tassinari Robin Baker Md; Tauber David; Tauber Kate; Taylor Ben Frazier; Taylor Matthew Arnfin; Telisky Ashley; Theresa Carpenter; Thevenin Claudwardy; Thibodeau Lorraine G Md; Thirkannad Indira; Thomas James Md; Thompson Sandra Marie Np; Thompson-Badamosi Tanya L; Tichich Jennifer Brown; Tierney Rachel M; Tirabassi Michael V; Tobolsky Shimon Rpa; Torosoff Mikhail T Md; Tortorici Danielle Maria; Trickey David L Md; Tristram Debra A Md; Tschinkel Marybeth; Tse Sara Elizabeth; Turinsky Andrew; Turner Latasha M; Tyler Christopher D; Ungerland Michael J Rpa; Ursillo Christopher Ryan; Utter Denise Maria; Vaisman Vadim; Valentine Elizabeth A Md; Valerian Brian Thomas Md; Valliere Julie; Van Dyck Timothy K; Vandepol-Rimash Maria; Varghese Noel Md; Varlamov Anna; Varone Ricky A Rpa; Veet Deanna Marie; Vena Stephen Albert; Venditti Ferdinand Joseph Jr; Venugopal Sushma; Verdini John Patrick Md; Verra Mark A Md; Vinciguerra Timothy J Pc Md; Vinh Phuong Md; Visagie Anina Isabella; Vivenzio Maria; Voccia Ryan James; Wagg Amber Nichole; Wagle William Md; Walke Ashley Danielle; Wallis Warren M; Walsh Raymond Francis Md; Wang Qiong Md; Ward Kathleen A; Warner Courtney Jill; Wasacz Christopher John; Washburn Kate; Waters Timothy Robert; Waxman Michael Jay; Weaver Jacqueline Md; Weidner Mark H Md; Weil Dympna Lynch; Weinberg Gerard Md; Weinreb David; Weiss Richard G Md; Weiss Robin; Weitzel Megan Adele; Welliver Robert Charles Jr; Wells Catherine; Werner Nancy; Wharton Seth W Md; Wheeler Julie Ann Np; White Mark Donald Md; White Noah; Whiteside Beth; Whiteside Michael; Whitney Valerie C Rpa; Whyte Mary C Md; Wickman Douglas; Wiczulis Alicia; Wiest Daniel R Rpa; Wilkins Lance Julius Md; William H Montgomery Jr; Williams David C; Williams Eric Taylor; Williams-Weekes Terri A; Winseman Jeffrey Scott Md; Wohlfahrt Kristine Marie; Wolf Lisa J Rpa; Wolner Ron K; Wood Bret James Do; Wood Colleen T Np; Woodard Jennifer; Wurl Derrick R Md; Yager Jennifer M; Yamada Brian S; Yamada Jennifer Susan Md; Yamamoto Junichi Md; Yarinsky Steven Md; Yarze Joseph C Md; Yellen Jacob; Ying Rodney Lloyd Md; Yocono Mark A Md; Young Pamela Y Rpa; Youngelman Debbie F Md; Zahir Mehjabin; Zamer Joshua D Md; Zeronda Stephanie Rpa; Zhang Li; Zhu Xinjun; Zieker Christopher Robert Md; Zimmerman Earl A Md; Zobal-Ratner Jitka Ludmila; Zysik Meghan |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| Task<br>M1:1. Identify key stakeholders and participating provider organizations critical for successful project implementation.  |                     | Project         |               | Completed | 09/07/2015          | 09/30/2016        | 09/07/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| Task<br>M1:2. Create a PPS-wide project sub-committee with representation from key stakeholders to oversee the project implementation.  |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| Task<br>M1:3. Collaborate and form agreements with overlapping PPSs (i.e. Alliance for Better Health Care will be implementing 3.d.ii), Asthma Coalition of the Capital Region, and other stakeholders to align initiatives to support the guideline-concordant care.   |                     | Project         |               | Completed | 10/05/2015          | 12/31/2015        | 10/05/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| Task<br>M1:4. Survey key stakeholders to assess current use and   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |

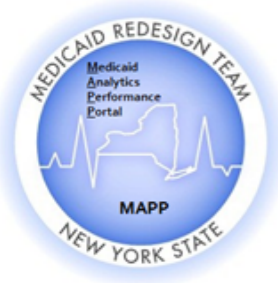


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| adherence to guideline-concordant care Expert Panel Review-3 (EPR-3) guidelines, range of services provided, and referral mechanisms.  |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M1:5. Develop, working in collaboration with the project sub-committee and clinical experts across the PPS, a draft document defining the future state for the management of asthma utilizing evidence-based strategies.  |                     | Project         |               | Completed | 04/01/2016          | 05/18/2016        | 04/01/2016 | 05/18/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:6. Submit the draft future state document to Clinical and Quality Affairs committee for review and approval.   |                     | Project         |               | Completed | 04/01/2016          | 05/18/2016        | 04/01/2016 | 05/18/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M1:7. Execute written contracts with participating providers implementation of asthma guidelines.   |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:8. Identify a participating provider organization located in a geographic area with high burden of asthma across the PPS sub-regions and finalize agreements for piloting the new model.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:9. Complete a gap-analysis utilizing the current state assessment and defined future state and, working in collaboration with the practice team, develop an action plan for the implementation of the new model.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:10. Implement the approved action plan at the pilot participating provider site utilizing the PDSA approach.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:11. Monitor ongoing performance, analyze clinical and operational outcomes, and identify timelines/practice sites for spread of successful tests of change.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee. |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |

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|---|---------------------|-----------------|--|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| for connectivity to SHIN-NY and HIXNY.  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:3. Work with participating providers, not currently using EHRs, to incentivize EHR adoption for patient care management.  |                     | Project         |  | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M2:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.  |                     | Project         |  | Completed | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:5. Utilizing the IT-TOM pilot experience, design the PPS-wide future state connectivity model.  |                     | Project         |  | Completed | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.  |                     | Project         |  | Completed | 02/12/2016          | 06/30/2016        | 02/12/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |
| <b>Task</b><br>M2:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.  |                     | Project         |  | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #2</b><br>Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.   | DY2 Q2              | Project         | N/A  | Completed | 06/01/2015          | 09/30/2016        | 06/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>Agreements with asthma specialists and asthma educators are established.   |                     | Project         |  | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Primary Care Provider (PCP)</u>     | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| Assevero Anna-Maria D Md; Bala Virinchi; Baldini Gleda P Md; Brown Sheryl; Clark Catherine Nielsen; Ditursi Mary Kathleen Williams; Harde Has Mukh C Md; Hechanova Arnel B Md; James Philip C Md; Kelleher Ruth Ellen; Mack Brigid; Manjunath Kallanna Md; O'Brien Joanne Elizabeth; Owen Claudina; Paeglow Robert John Md; Ray David Allan Md; Sacco Joseph P Md; Sgarlata Donna L; Sheehan Rebecca; Signor Connie J; Stein Rhonda Danielle Md; Stetzer Lee; Tomiak Henry P Jr Md; Vasquez Deborah A Md; Young Linda; Zeltner Theodore Harold Md |                     |                 |  |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.   |                     | Provider        | <u>Safety Net Practitioner - Non-Primary Care Provider (PCP)</u> | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Providers Associated with Completion:</b>  |                     |                 |  |           |                     |                   |            |            |                  |                                  |



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|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Bailey Laura M; Dodd Jack Edward Jr; Drzymalski Jolanta; Friedman Cynthia Susan; Gsell Jennifer Lee; Hausman Julia H; Hinds Marcel Eldon Md; Kamenir Steven A Md; Marici Edward M Do; Nordhauser Micaela Urbano; Steindler Jason Harrison; Weinberg Gerard Md   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Telemedicine service implemented, based on evaluation of impact to underserved areas including, but not limited to:<br>- analysis of the availability of broadband access in the geographic area being served<br>- gaps in services<br>- geographic areas where PPS lacks resources and telemedicine will be used to increase the reach of these patients<br>- why telemedicine is the best alternative to provide these services<br>- challenges expected and plan to pro-actively resolve<br>- plan for long term sustainability |                     | Project         |               | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Create a list of participating asthma and allergy specialists in the PPS network who serve the targeted patient populations.   |                     | Project         |               | Completed | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:2. Utilizing recognized best care practices, the CQAC will establish a methodology to define a patient/physician ratio across the PPS.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Establish appropriate contractual agreements with regional asthma specialists, including the Asthma Coalition of the Capital Region, to support a comprehensive, coordinated and patient-centered asthma care plan in the community, including training and development of practice based asthma educators.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:1. Establish, under the auspices of the AMCH PPS Technology and Data Management Committee (TDMC), an ad-hoc project sub-committee to oversee the development and implementation of the action plan to assure PPS-wide EHR connectivity to the SHIN-NY and HIEs. Ensure key representation from identified providers and partners on the project sub-committee.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:2. Perform a current state assessment on the participating provider organizations' EHR systems' features and capabilities for connectivity to SHIN-NY and HIXNY.  |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:3. Work with participating providers, not currently using   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| EHRs, to incentivize EHR adoption for patient care management.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>M2:4. Develop and execute partner agreements and appropriate BAAs with participating providers who will utilize HIXNY and SHIN-NY for HIE connectivity and secure HIPPA compliant information sharing across PPS providers.   |                     | Project         |               | Completed | 10/01/2015          | 12/31/2015        | 10/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M2:5. Utilizing the IT-TOM pilot experience, design the PPS-wide future state connectivity model.   |                     | Project         |               | Completed | 06/01/2015          | 03/31/2016        | 06/01/2015 | 03/31/2016 | 03/31/2016       | DY1 Q4                           |
| <b>Task</b><br>M2:6. Complete a gap-analysis utilizing the current state assessment and defined future state, creating an implementation plan and a phased roll-out.   |                     | Project         |               | Completed | 02/12/2016          | 09/30/2016        | 02/12/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M2:7. Monitor progress on the ability to share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look-up, and support timely care management decisions.   |                     | Project         |               | Completed | 10/01/2015          | 09/30/2016        | 10/01/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:1. Establish a telemedicine sub-committee to evaluate the impact of telemedicine on underserved areas as outlined in Milestone 2 Metric 3.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M3:2: Based on the results of the evaluation, the two sub-committees will develop a draft telemedicine implementation plan that will include a vendor selection process if necessary. The draft document will be reviewed and approved by CQAC and the TDMC.                |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:3. EHR subcommittee and TDMC will identify a pilot organization based on gaps in service and resources and develop a detailed organization-specific action plan for piloting the program.  |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M3:4. Based on the experience from the initial pilot, the model will be updated, with resolution of identified challenges from the pilot, and spread to other regions with similar gaps in services and resources needed for effective evidence-based management of asthma. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone #3</b><br>Deliver educational activities addressing asthma management to  | DY2 Q2              | Project         | N/A           | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |



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| Project Requirements (Milestone/Task Name)  | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| participating primary care providers.   |                     |                 |               |           |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>Participating providers receive training in evidence-based asthma management.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. Project sub-committee will survey participating practitioners and relevant CBOs on current utilization of EPR-3 guidelines for managing patients with asthma.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:2. Project sub-committee, working in collaboration with asthma specialists, will develop/adopt evidence-based asthma protocols, care pathways and training tools to train participating practitioners and staff working at CBOs responsible for providing care for asthma patients. |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:3. Project sub-committee, working in collaboration with WCC and participating partners, will identify appropriate training methods, including "train the trainer model", to train staff on EPR-3 guidelines and PPS adopted asthma care protocols.                                  |                     | Project         |               | Completed | 07/01/2016          | 09/30/2016        | 07/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Project sub-committee will collaborate with Albany Medical College and other educational institutions to conduct annual CME programs to update practitioners and staff on new developments in asthma care and management.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:5. Conduct periodic educational sessions for participating partner locations, CBOs and school nurses, on asthma education and adopted guidelines/models.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:6. Collaborate with overlapping PPSs, as appropriate, to offer training on becoming a Certified Asthma Educator.  |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Milestone #4</b><br>Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.   | DY2 Q2              | Project         | N/A           | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>PPS has established agreements with MCOs that address the coverage of patients with asthma health issues. PPS has established agreements with participating health home care managers, PCPs, and specialty providers.  |                     | Project         |               | Completed | 10/05/2015          | 09/30/2016        | 10/05/2015 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:1. AMCH PMO will work in collaboration with AMCH  |                     | Project         |               | Completed | 04/29/2016          | 09/30/2016        | 04/29/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |





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**Albany Medical Center Hospital (PPS ID:1)**

| <b>Project Requirements<br/>(Milestone/Task Name)</b>  | <b>Prescribed<br/>Due Date</b> | <b>Reporting<br/>Level</b> | <b>Provider Type</b> | <b>Status</b> | <b>Original<br/>Start Date</b> | <b>Original<br/>End Date</b> | <b>Start Date</b> | <b>End Date</b> | <b>Quarter<br/>End Date</b> | <b>DSRIP<br/>Reporting Year<br/>and Quarter</b> |
|--|--------------------------------|----------------------------|----------------------|---------------|--------------------------------|------------------------------|-------------------|-----------------|-----------------------------|---|
| Integrated Delivery Systems Department to evaluate current contractual arrangements with payers for possible amendments.   |                                |                            |                      |               |                                |                              |                   |                 |                             |   |
| <b>Task</b><br>M1:2. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to develop a framework that can be applied across the regional provider network.   |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:3. AMCH PMO will work with Medicaid MCOs to implement a roadmap following appropriate Federal and State laws, regulations and guidelines.  |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:4. AMCH PMO will work with its provider network to provide technical support and assistance to amend existing fee-for-service contracts.   |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:5. AMCH PMO will work in collaboration with AMCH Integrated Delivery Systems Department to negotiate required contracts with MCOs.   |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:6. AMCH PMO, in collaboration with AMCH Integrated Delivery Systems Department, will discuss utilization trends, performance issues, and payment reform during monthly meetings with managed care organizations. |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:7. AMCH PMO will engage Medicaid MCOs in broader areas of concern to the PPS including financial sustainability, risk sharing, and compliance with competitive behaviors.  |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:8. AMCH PPS will execute negotiated contracts with MCOs to implement required elements of the CMS approved VBP roadmap.  |                                | Project                    |                      | Completed     | 04/29/2016                     | 09/30/2016                   | 04/29/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Milestone #5</b><br>Use EHRs or other technical platforms to track all patients engaged in this project.  | DY2 Q2                         | Project                    | N/A                  | Completed     | 10/05/2015                     | 09/30/2016                   | 10/05/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.  |                                | Project                    |                      | Completed     | 10/05/2015                     | 09/30/2016                   | 10/05/2015        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |
| <b>Task</b><br>M1:1. Articulate the scope, objectives and requirements of a patient tracking system to support effective population health management across PPS entities.   |                                | Project                    |                      | Completed     | 04/01/2016                     | 09/30/2016                   | 04/01/2016        | 09/30/2016      | 09/30/2016                  | DY2 Q2  |



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| Project Requirements (Milestone/Task Name)   | Prescribed Due Date | Reporting Level | Provider Type | Status    | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|---------------------|-----------------|---------------|-----------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Task</b><br>M1:2. Assess the current systems' capabilities to track patients effectively and determine the need for additional technical systems.   |                     | Project         |               | Completed | 10/05/2015          | 11/30/2015        | 10/05/2015 | 11/30/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>M1:3. Implement additional technical and workflow changes required for consistent and accurate tracking of targeted patient groups.   |                     | Project         |               | Completed | 04/01/2016          | 09/30/2016        | 04/01/2016 | 09/30/2016 | 09/30/2016       | DY2 Q2                           |
| <b>Task</b><br>M1:4. Implement training sessions to educate participating partners on how to utilize the additional technical platforms.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:5. Utilize population health IT vendor to support the needs of the PPS and individual organizations/practices to track their population groups for population health management needs. |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>M1:6. Generate required reports on the performance of individual and population health interventions implemented by the practice teams.   |                     | Project         |               | On Hold   | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |

**Prescribed Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text |
|--|----------------|
| Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management. |                |
| Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.   |                |
| Deliver educational activities addressing asthma management to participating primary care providers.   |                |
| Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.   |                |



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**Prescribed Milestones Narrative Text**

| Milestone Name   | Narrative Text |
|--|----------------|
| Use EHRs or other technical platforms to track all patients engaged in this project. |                |

**Milestone Review Status**

| Milestone #  | Review Status   | IA Formal Comments  |
|--------------|-----------------|---|
| Milestone #1 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #2 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #3 | Pass & Complete |   |
| Milestone #4 | Fail            | The PPS did not complete this milestone by the prescribed deadline. |
| Milestone #5 | Pass & Complete |   |



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**✓ IPQR Module 3.d.iii.4 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name               | Status    | Description          | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|-----------------------------------|-----------|----------------------|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| Milestone<br>Mid-Point Assessment | Completed | Mid-Point Assessment | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**IPQR Module 3.d.iii.5 - IA Monitoring**

**Instructions :**



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

**Project 4.b.i – Promote tobacco use cessation, especially among low SES populations and those with poor mental health.**

**✓ IPQR Module 4.b.i.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

There are many risks to successfully implementing this project especially among low SES populations and those with poor mental health.

Lack of understanding of cessation medications & counseling, and lack of referrals to the NYS Smokers' Quitline are barriers to success. Lack of time spent providing tobacco cessation counseling and education to patients, and the lack of integration between primary care and behavioral health providers are also barriers. A lack of organizational commitment may also hinder cessation efforts. MCOs may need to modify buy into the value of the program and agree to reimburse for tobacco cessation services.

To mitigate these risks AMCH PPS will:

- Form a project subcommittee or ensure relevant tobacco cessation discussions occur in the appropriate subcommittees.
- Identify opportunities to meet multiple project milestones related to tobacco use cessation with cross-cutting requirements in EHR tracking and Behavioral Health.
- Implement cross-PPS EHR capabilities including excel transfer of data in lieu of MAPP functionality.
- Activate WCC to provide resources and materials to organizations and providers for collaboration, coordination, and patient engagement.
- In collaboration with our workforce training vendor, the PMO will provide training and resources for the current workforce to ensure cessation counseling is provided in a culturally and linguistically appropriate way.



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**✅ IPQR Module 4.b.i.2 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name   | Status      | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|-------------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone</b><br>Engage community partners in collaboration regarding tobacco cessation initiatives.   | In Progress | Engage community partners in collaboration regarding tobacco cessation initiatives.  | 10/05/2015          | 03/31/2020        | 10/05/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. AMCH PMO will identify community partners including providers, CBOs, and advocacy groups.   | In Progress | 1. AMCH PMO will identify community partners including providers, CBOs, and advocacy groups.   | 10/05/2015          | 03/31/2020        | 10/05/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Through the CCAC, AMCH PMO will communicate planned actions to increase access to tobacco cessation resources for appropriate patient populations.                              | In Progress | 2. Through the CCAC, AMCH PMO will communicate planned actions to increase access to tobacco cessation resources for appropriate patient populations.                              | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. In collaboration with identified participants, AMCH PPS will consider system wide approaches to identify patients for tobacco-use screening and appropriate follow-up.          | In Progress | 3. In collaboration with identified participants, AMCH PMO will consider system wide approaches to identify patients for tobacco-use screening and appropriate follow-up.          | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Review and update a summary of current institutional policies regarding tobacco-free environment (one time).  | In Progress | Review and update a summary of current institutional policies regarding tobacco-free environment (one time).   | 10/05/2015          | 03/31/2020        | 10/05/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. Create project sub-committee with representation from key stakeholders, including Advancing Tobacco-Free Communities, to oversee the project implementation.                    | In Progress | 1. Create project sub-committee with representation from key stakeholders, including Advancing Tobacco-Free Communities, to oversee the project implementation.                    | 10/05/2015          | 03/31/2020        | 10/05/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Coordinate with neighboring and overlapping PPS's and other key stakeholders to assess partners and identify PPS partner sites with existing tobacco-free environment policies. | In Progress | 2. Coordinate with neighboring and overlapping PPS's and other key stakeholders to assess partners and identify PPS partner sites with existing tobacco-free environment policies. | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. Engage executive leadership at sites that lack policies, to support adoption of tobacco-free  | In Progress | 3. Engage executive leadership at sites that lack policies, to support adoption of tobacco-free environment policies.  | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Milestone/Task Name  | Status      | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|-------------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| environment policies.  |             |  |                     |                   |            |            |                  |                                  |
| <b>Milestone</b><br>Incorporate provider training in tobacco dependence treatment.   | In Progress | Incorporate provider training in tobacco dependence treatment.   | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. In collaboration with WCC, approve trainings to be offered to providers as part of awareness of tobacco cessation initiatives.   | In Progress | 1. In collaboration with WCC, approve trainings to be offered to providers as part of awareness of tobacco cessation initiatives.  | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Track, through WCC, providers who complete these trainings on a biennial schedule.   | In Progress | 2. Track, through WCC, providers who complete these trainings on a biennial schedule.  | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>A PPS-wide policy that ensures tobacco status is queried and documented consistent with USPSTF guidelines.   | In Progress | A PPS-wide policy that ensures tobacco status is queried and documented consistent with USPSTF guidelines.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. Make recommendations in the form of a practice/site specific action plan for referral and follow-up policies and procedures based on findings and best practices.  | In Progress | 1. Make recommendations in the form of a practice/site specific action plan for referral and follow-up policies and procedures based on findings and best practices.                                     | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Development and use of routine performance measures for monitoring tobacco use screening and treatment.  | In Progress | Development and use of routine performance measures for monitoring tobacco use screening and treatment.  | 01/25/2016          | 03/31/2020        | 01/25/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. Identify available, routine performance measures captured by participating providers regarding tobacco use, screening, and treatment.  | In Progress | 1. Identify available, routine performance measures captured by participating providers regarding tobacco use, screening, and treatment.   | 01/25/2016          | 03/31/2020        | 01/25/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Share routine performance measures with participating providers to encourage adoption of appropriate screening and treatment activities to assist with reporting and measurement.                          | In Progress | 2. Share routine performance measures with participating providers to encourage adoption of appropriate screening and treatment activities to assist with reporting and measurement.                     | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Identify dedicated staff who will provide tobacco dependency treatment as outlined by the USPHS Clinical Practice Guidelines and assess the delivery of this treatment in staff performance evaluations. | In Progress | Identify dedicated staff who will provide tobacco dependency treatment as outlined by the USPHS Clinical Practice Guidelines and assess the delivery of this treatment in staff performance evaluations. | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b>  | In Progress | 1. In collaboration with WCC, identify needs for training across PPS   | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |





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| Milestone/Task Name   | Status      | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|-------------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| 1. In collaboration with WCC, identify needs for training across PPS partners, with special focus on those providing behavioral health services.  |             | partners, with special focus on those providing behavioral health services.   |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>2. Following USPHS Clinical Practice Guidelines, encourage participating partners to report treatment outcomes.  | In Progress | 2. Following USPHS Clinical Practice Guidelines, encourage participating partners to report treatment outcomes.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. Encourage participating providers to conduct staff evaluations annually regarding competencies associated with USPHS Clinical Practice Guidelines.  | In Progress | 3. Encourage participating providers to conduct staff evaluations annually regarding competencies associated with USPHS Clinical Practice Guidelines.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>4. Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.  | In Progress | 4. Develop clinician, staff and practice recognition program to acknowledge high performance and motivate other practices to improve their performance.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Engage in MOUs with NYS DOH Bureau of Tobacco Control's Health Systems for a Tobacco-Free NY's contractors to receive technical assistance on system improvements related to tobacco use cessation. | In Progress | Engage in MOUs with NYS DOH Bureau of Tobacco Control's Health Systems for a Tobacco-Free NY's contractors to receive technical assistance on system improvements related to tobacco use cessation. | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. Execute MOUs with NYS DOH Bureau of Tobacco Control's Health Systems to receive support on system improvements related to tobacco use cessation.  | In Progress | 1. Execute MOUs with NYS DOH Bureau of Tobacco Control's Health Systems to receive support on system improvements related to tobacco use cessation.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Collaborate with overlapping and neighboring PPS's to coordinate tobacco cessation programs across the region.  | In Progress | 2. Collaborate with overlapping and neighboring PPS's to coordinate tobacco cessation programs across the region.   | 04/01/2016          | 03/31/2020        | 04/01/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Resources budgeted for related community service plan activities.   | Completed   | Resources budgeted for related community service plan activities.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>Resources budgeted for related community service plan activities.  | Completed   | Resources budgeted for related community service plan activities.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Milestone</b><br>Mid-Point Assessment  | Completed   | Mid-Point Assessment  | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |



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**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name   | Narrative Text |
|--|----------------|
| Engage community partners in collaboration regarding tobacco cessation initiatives.  |                |
| Review and update a summary of current institutional policies regarding tobacco-free environment (one time).   |                |
| Incorporate provider training in tobacco dependence treatment.   |                |
| A PPS-wide policy that ensures tobacco status is queried and documented consistent with USPSTF guidelines.   |                |
| Development and use of routine performance measures for monitoring tobacco use screening and treatment.  |                |
| Identify dedicated staff who will provide tobacco dependency treatment as outlined by the USPHS Clinical Practice Guidelines and assess the delivery of this treatment in staff performance evaluations. |                |
| Engage in MOUs with NYS DOH Bureau of Tobacco Control's Health Systems for a Tobacco-Free NY's contractors to receive technical assistance on system improvements related to tobacco use cessation.      |                |
| Resources budgeted for related community service plan activities.  |                |
| Mid-Point Assessment   |                |

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |



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**IPQR Module 4.b.i.3 - IA Monitoring**

**Instructions :**



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**Project 4.b.ii – Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic diseases that are not included in domain 3, such as cancer)**

**✓ IPQR Module 4.b.ii.1 - Major Risks to Implementation and Mitigation Strategies**

**Instructions :**

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Barriers identified in our CNA include: wait time for appointments, lack of specialists, transportation and stigma. Patient engagement may also be negatively impacted by cultural differences, age, sex and socioeconomic status. Such factors leave community members at a disadvantage. The second risk is the capability to obtain and facilitate training, education and workforce resources. It will be vital to provide ongoing education, and providing training over such an expansive area is challenging. Provider and non-provider staff must be trained and demonstrate competency in preventive care initiatives. Community-based training resources will also need to be developed. Another risk is EHR compatibility across the PPS Network. IT capabilities and capacities vary across providers. A number of partnering organizations lack sophisticated IT infrastructure and EHR system connectivity, necessary to facilitate this project. The PMO will need protocols, consents, care teams, IT infrastructure, etc., Connections to RHIO/HIXNY/SHINY will be important in addressing this risk

To mitigate these risks, the PMO will:

- Activate WCC to provide resources to providers for collaboration, coordination, and patient engagement.
- Our workforce training vendor will provide extensive resources for the current workforce.
- Health Navigators will assist patients with their health care needs.
- The PMO will work with MCOs to ensure that cancer screenings are affordable and accessible
- Care teams will utilize protocols to track patient appointments and screening results.
- Mobile breast cancer screening vans will also be deployed in the regional "hot spots."
- Take advantage of developing EHR capabilities and EHR prompts.
- The PMO will also use, follow-up calls, health navigators and other case managers to process and address cancer screening results.
- The PPS and its partners have applied for capital funding to enhance IT infrastructure.



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**✅ IPQR Module 4.b.ii.2 - PPS Defined Milestones**

**Instructions :**

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

| Milestone/Task Name  | Status      | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|--|-------------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| <b>Milestone</b><br>Devise a communication strategy to community partners on intention to take action on this project and invitation for collaboration.  | Completed   | Devise a communication strategy to community partners on intention to take action on this project and invitation for collaboration.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>1. AMCH PMO will identify community partners including providers, CBOs, and advocacy groups.  | Completed   | 1. AMCH PMO will identify community partners including providers, CBOs, and advocacy groups.  | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>2. Through the CCAC, AMCH PMO will communicate planned actions to increase access to preventative screenings for appropriate patient populations.   | Completed   | 2. Through the CCAC, AMCH PMO will communicate planned actions to increase access to preventative screenings for appropriate patient populations.   | 11/01/2015          | 12/31/2015        | 11/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>3. In collaboration with identified participants, AMCH PMO will adopt system-wide approaches to identify patients for screening and follow-up.  | On Hold     | 3. In collaboration with identified participants, AMCH PMO will adopt system-wide approaches to identify patients for screening and follow-up.  | 04/01/2015          | 03/31/2020        | 04/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Increase provider/care team knowledge of screening protocols and clinical practice guidelines.   | In Progress | Increase provider/care team knowledge of screening protocols and clinical practice guidelines.  | 12/01/2015          | 03/31/2020        | 12/01/2015 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. CQAC will review information from the NYS Cancer Services Program website. This information will be used to recommend comprehensive cancer screening policies and protocols, for adoption, as appropriate. | Completed   | 1. CQAC will review information from the NYS Cancer Services Program website. This information will be used to recommend comprehensive cancer screening policies and protocols, for adoption, as appropriate. | 12/01/2015          | 03/31/2020        | 12/01/2015 | 03/15/2017 | 03/31/2017       | DY2 Q4                           |
| <b>Task</b><br>2. AMCH PMO, in collaboration with CQAC, will review, recommend, and distribute screening protocols to participating providers.   | In Progress | 2. AMCH PMO, in collaboration with CQAC, will review, recommend, and distribute screening protocols to participating providers.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. AMCH PMO will encourage participating providers to adopt policies and protocols and make   | In Progress | 3. AMCH PMO will encourage participating providers to adopt policies and protocols and make EHR updates to alert and remind patients in need of   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Milestone/Task Name   | Status      | Description  | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|-------------|--|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| EHR updates to alert and remind patients in need of follow-up for abnormal results.   |             | follow-up for abnormal results.  |                     |                   |            |            |                  |                                  |
| <b>Milestone</b><br>Increase rates of screening (or re-screening) among defined patient populations.  | In Progress | Increase rates of screening (or re-screening) among defined patient populations.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. AMCH PMO will work with population health vendors, as well as Health Departments and others, to collect and analyze baseline rates of cancer screenings conducted across the network for the target population.             | In Progress | 1. AMCH PMO will work with population health vendors, as well as Health Departments and others, to collect and analyze baseline rates of cancer screenings conducted across the network for the target population.             | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. Working with identified community partners and population health IT platforms, AMCH PMO will recommend a system-wide approach for monitoring performance and sharing results.   | In Progress | 2. Working with identified community partners and population health IT platforms, AMCH PMO will recommend a system-wide approach for monitoring performance and sharing results.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. Following PDSA or Rapid Cycle Improvement methodologies, the AMCH PMO will assist participating practice sites, where improvement opportunities might exist, and facilitate performance improvement to the extent feasible. | In Progress | 3. Following PDSA or Rapid Cycle Improvement methodologies, the AMCH PMO will assist participating practice sites, where improvement opportunities might exist, and facilitate performance improvement to the extent feasible. | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Increase follow-up of abnormal cancer screening results on a timely basis.  | In Progress | Increase follow-up of abnormal cancer screening results on a timely basis.   | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>1. AMCH PMO will work with population health vendors to collect and analyze baseline rates of follow-up of abnormal cancer screening results.  | In Progress | 1. AMCH PMO will work with population health vendors to collect and analyze baseline rates of follow-up of abnormal cancer screening results.  | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>2. AMCH PMO will provide guidance to participating providers for alerting and reminding patients in need of follow-up for abnormal results.  | In Progress | 2. AMCH PMO will provide guidance to participating providers for alerting and reminding patients in need of follow-up for abnormal results.  | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b><br>3. Following PDSA or Rapid Cycle Improvement methodologies, the AMCH PMO will assist participating practice sites, where improvement opportunities might exist, and facilitate performance improvement where feasible.         | In Progress | 3. Following PDSA or Rapid Cycle Improvement methodologies, the AMCH PMO will assist participating practice sites, where improvement opportunities might exist, and facilitate performance improvement where feasible.         | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Task</b>   | In Progress | 4. AMCH PMO, in collaboration with the WCC and CCHLC, will coordinate  | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |



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| Milestone/Task Name   | Status      | Description   | Original Start Date | Original End Date | Start Date | End Date   | Quarter End Date | DSRIP Reporting Year and Quarter |
|---|-------------|---|---------------------|-------------------|------------|------------|------------------|----------------------------------|
| 4. AMCH PMO, in collaboration with the WCC and CCHLC, will coordinate training of community navigators with culturally-appropriate navigation materials for patient populations with low screening rates. |             | training of community navigators with culturally-appropriate navigation materials for patient populations with low screening rates. |                     |                   |            |            |                  |                                  |
| <b>Task</b><br>5. AMCH PMO will publish aggregated cancer screening rates, for the network of providers at least annually.  | In Progress | 5. AMCH PMO will publish aggregated cancer screening rates, for the network of providers at least annually.                         | 12/22/2016          | 03/31/2020        | 12/22/2016 | 03/31/2020 | 03/31/2020       | DY5 Q4                           |
| <b>Milestone</b><br>Resources budgeted for related community service plan activities.   | Completed   | Resources budgeted for related community service plan activities.   | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Task</b><br>1. The AMCH PPS Finance Committee will develop a budget to support the achievement of project milestones.  | Completed   | 1. The AMCH PPS Finance Committee will develop a budget to support the achievement of project milestones.                           | 09/01/2015          | 12/31/2015        | 09/01/2015 | 12/31/2015 | 12/31/2015       | DY1 Q3                           |
| <b>Milestone</b><br>Mid-Point Assessment  | Completed   | Mid-Point Assessment  | 06/30/2016          | 06/30/2016        | 06/30/2016 | 06/30/2016 | 06/30/2016       | DY2 Q1                           |

**PPS Defined Milestones Current File Uploads**

| Milestone Name | User ID | File Type | File Name | Description | Upload Date |
|----------------|---------|-----------|-----------|-------------|-------------|
|----------------|---------|-----------|-----------|-------------|-------------|

No Records Found

**PPS Defined Milestones Narrative Text**

| Milestone Name  | Narrative Text |
|---|----------------|
| Devise a communication strategy to community partners on intention to take action on this project and invitation for collaboration. |                |
| Increase provider/care team knowledge of screening protocols and clinical practice guidelines.                                      |                |
| Increase rates of screening (or re-screening) among defined patient populations.  |                |
| Increase follow-up of abnormal cancer screening results on a timely basis.  |                |
| Resources budgeted for related community service plan activities.   |                |



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**PPS Defined Milestones Narrative Text**

| Milestone Name       | Narrative Text |
|----------------------|----------------|
| Mid-Point Assessment |                |

**Module Review Status**

| Review Status  | IA Formal Comments |
|----------------|--------------------|
| Pass & Ongoing |                    |





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**IPQR Module 4.b.ii.3 - IA Monitoring**

**Instructions :**



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**Attestation**

The Lead Representative has been designated by the Primary Lead PPS Provider (PPS Lead Entity) as the signing officiate for the DSRIP Quarterly Report. The Lead Representative has the authority to complete this attestation on behalf of the PPS network. The Lead Representative and PPS Lead Entity are responsible for the authenticity and accuracy of the material submitted in this report.

The Lead Representative of the Performing Provider System (PPS) must complete this attestation form in order for the project application to be accepted by the NYS Department of Health. Once the attestation is complete, the Quarterly Report will be locked down from any further editing. Do not complete this section until the entire Quarterly Report is complete.

If the Quarterly Report becomes locked in error and additional changes are necessary, please use the contact information on the Home Page to request that the Quarterly Report be unlocked.

To electronically sign this Quarterly Report, please enter the required information and check the box below:

I here by attest, as the Lead Representative of the 'Albany Medical Center Hospital', that all information provided on this Quarterly report is true and accurate to the best of my knowledge, and that, following initial submission in the current quarterly reporting period as defined by NY DOH, changes made to this report were pursuant only to documented instructions or documented approval of changes from DOH or DSRIP Independent Assessor.

|                                     |                             |
|-------------------------------------|-----------------------------|
| <b>Primary Lead PPS Provider:</b>   | ALBANY MEDICAL CTR HOSPITAL |
| <b>Secondary Lead PPS Provider:</b> |                             |
| <b>Lead Representative:</b>         | Christine McIntyre          |
| <b>Submission Date:</b>             | 06/20/2017 11:46 AM         |

**Comments:**



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| <b>Status Log</b>              |               |                                 |                |                       |
|--------------------------------|---------------|---------------------------------|----------------|-----------------------|
| <b>Quarterly Report (DY,Q)</b> | <b>Status</b> | <b>Lead Representative Name</b> | <b>User ID</b> | <b>Date Timestamp</b> |
| DY2, Q4                        | Adjudicated   | Christine McIntyre              | mrurak         | 06/30/2017 01:19 PM   |



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| <b>Comments Log</b> |   |                |                       |
|---------------------|---|----------------|-----------------------|
| <b>Status</b>       | <b>Comments</b>   | <b>User ID</b> | <b>Date Timestamp</b> |
| Adjudicated         | The DY2, Q4 Quarterly Report has been adjudicated.              | mrurak         | 06/30/2017 01:19 PM   |
| Returned            | The DY2, Q4 Quarterly Report has been returned for Remediation. | mrurak         | 05/31/2017 05:15 PM   |



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| Section    | Module Name  | Status      |
|------------|--|-------------|
| Section 01 | IPQR Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY         | ✔ Completed |
|            | IPQR Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)                    | ✔ Completed |
|            | IPQR Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY  | ✔ Completed |
|            | IPQR Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)             | ✔ Completed |
|            | IPQR Module 1.5 - Prescribed Milestones                                      | ✔ Completed |
|            | IPQR Module 1.6 - PPS Defined Milestones                                     | ✔ Completed |
|            | IPQR Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)                 | ✔ Completed |
|            | IPQR Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)                | ✔ Completed |
|            | IPQR Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)          | ✔ Completed |
|            | IPQR Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)        | ✔ Completed |
|            | IPQR Module 1.11 - IA Monitoring   |             |
| Section 02 | IPQR Module 2.1 - Prescribed Milestones                                      | ✔ Completed |
|            | IPQR Module 2.2 - PPS Defined Milestones                                     | ✔ Completed |
|            | IPQR Module 2.3 - Major Risks to Implementation & Risk Mitigation Strategies | ✔ Completed |
|            | IPQR Module 2.4 - Major Dependencies on Organizational Workstreams           | ✔ Completed |
|            | IPQR Module 2.5 - Roles and Responsibilities                                 | ✔ Completed |
|            | IPQR Module 2.6 - Key Stakeholders   | ✔ Completed |
|            | IPQR Module 2.7 - IT Expectations  | ✔ Completed |
|            | IPQR Module 2.8 - Progress Reporting   | ✔ Completed |
|            | IPQR Module 2.9 - IA Monitoring  |             |
| Section 03 | IPQR Module 3.1 - Prescribed Milestones                                      | ✔ Completed |
|            | IPQR Module 3.2 - PPS Defined Milestones                                     | ✔ Completed |
|            | IPQR Module 3.3 - Major Risks to Implementation & Risk Mitigation Strategies | ✔ Completed |
|            | IPQR Module 3.4 - Major Dependencies on Organizational Workstreams           | ✔ Completed |
|            | IPQR Module 3.5 - Roles and Responsibilities                                 | ✔ Completed |
|            | IPQR Module 3.6 - Key Stakeholders   | ✔ Completed |
|            | IPQR Module 3.7 - IT Expectations  | ✔ Completed |



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| Section    | Module Name  | Status                          |
|------------|--|---------------------------------|
|            | IPQR Module 3.8 - Progress Reporting   | ✔ Completed                     |
|            | IPQR Module 3.9 - IA Monitoring  |                                 |
| Section 04 | IPQR Module 4.1 - Prescribed Milestones                                      | ✔ Completed                     |
|            | IPQR Module 4.2 - PPS Defined Milestones                                     | ✔ Completed                     |
|            | IPQR Module 4.3 - Major Risks to Implementation & Risk Mitigation Strategies | ✔ Completed                     |
|            | IPQR Module 4.4 - Major Dependencies on Organizational Workstreams           | ✔ Completed                     |
|            | IPQR Module 4.5 - Roles and Responsibilities                                 | ✔ Completed                     |
|            | IPQR Module 4.6 - Key Stakeholders   | ✔ Completed                     |
|            | IPQR Module 4.7 - IT Expectations  | ✔ Completed                     |
|            | IPQR Module 4.8 - Progress Reporting   | ✔ Completed                     |
|            | IPQR Module 4.9 - IA Monitoring  |                                 |
| Section 05 | IPQR Module 5.1 - Prescribed Milestones                                      | ✔ Completed                     |
|            | IPQR Module 5.2 - PPS Defined Milestones                                     | ✔ Completed                     |
|            | IPQR Module 5.3 - Major Risks to Implementation & Risk Mitigation Strategies | ✔ Completed                     |
|            | IPQR Module 5.4 - Major Dependencies on Organizational Workstreams           | ✔ Completed                     |
|            | IPQR Module 5.5 - Roles and Responsibilities                                 | ✔ Completed                     |
|            | IPQR Module 5.6 - Key Stakeholders   | ✔ Completed                     |
|            | IPQR Module 5.7 - Progress Reporting   | ✔ Completed                     |
|            |  | IPQR Module 5.8 - IA Monitoring |
| Section 06 | IPQR Module 6.1 - Prescribed Milestones                                      | ✔ Completed                     |
|            | IPQR Module 6.2 - PPS Defined Milestones                                     | ✔ Completed                     |
|            | IPQR Module 6.3 - Major Risks to Implementation & Risk Mitigation Strategies | ✔ Completed                     |
|            | IPQR Module 6.4 - Major Dependencies on Organizational Workstreams           | ✔ Completed                     |
|            | IPQR Module 6.5 - Roles and Responsibilities                                 | ✔ Completed                     |
|            | IPQR Module 6.6 - Key Stakeholders   | ✔ Completed                     |
|            | IPQR Module 6.7 - IT Expectations  | ✔ Completed                     |
|            | IPQR Module 6.8 - Progress Reporting   | ✔ Completed                     |
|            |  | IPQR Module 6.9 - IA Monitoring |
| Section 07 | IPQR Module 7.1 - Prescribed Milestones                                      | ✔ Completed                     |



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| Section    | Module Name   | Status      |
|------------|---|-------------|
|            | IPQR Module 7.2 - PPS Defined Milestones  | ✔ Completed |
|            | IPQR Module 7.3 - Major Risks to Implementation & Risk Mitigation Strategies            | ✔ Completed |
|            | IPQR Module 7.4 - Major Dependencies on Organizational Workstreams                      | ✔ Completed |
|            | IPQR Module 7.5 - Roles and Responsibilities  | ✔ Completed |
|            | IPQR Module 7.6 - Key Stakeholders  | ✔ Completed |
|            | IPQR Module 7.7 - IT Expectations   | ✔ Completed |
|            | IPQR Module 7.8 - Progress Reporting  | ✔ Completed |
|            | IPQR Module 7.9 - IA Monitoring   |             |
| Section 08 | IPQR Module 8.1 - Prescribed Milestones   | ✔ Completed |
|            | IPQR Module 8.2 - PPS Defined Milestones  | ✔ Completed |
|            | IPQR Module 8.3 - Major Risks to Implementation & Risk Mitigation Strategies            | ✔ Completed |
|            | IPQR Module 8.4 - Major Dependencies on Organizational Workstreams                      | ✔ Completed |
|            | IPQR Module 8.5 - Roles and Responsibilities  | ✔ Completed |
|            | IPQR Module 8.6 - Key Stakeholders  | ✔ Completed |
|            | IPQR Module 8.7 - IT Expectations   | ✔ Completed |
|            | IPQR Module 8.8 - Progress Reporting  | ✔ Completed |
|            | IPQR Module 8.9 - IA Monitoring   |             |
| Section 09 | IPQR Module 9.1 - Prescribed Milestones   | ✔ Completed |
|            | IPQR Module 9.2 - PPS Defined Milestones  | ✔ Completed |
|            | IPQR Module 9.3 - Major Risks to Implementation & Risk Mitigation Strategies            | ✔ Completed |
|            | IPQR Module 9.4 - Major Dependencies on Organizational Workstreams                      | ✔ Completed |
|            | IPQR Module 9.5 - Roles and Responsibilities  | ✔ Completed |
|            | IPQR Module 9.6 - Key Stakeholders  | ✔ Completed |
|            | IPQR Module 9.7 - IT Expectations   | ✔ Completed |
|            | IPQR Module 9.8 - Progress Reporting  | ✔ Completed |
|            | IPQR Module 9.9 - IA Monitoring   |             |
| Section 10 | IPQR Module 10.1 - Overall approach to implementation                                   | ✔ Completed |
|            | IPQR Module 10.2 - Major dependencies between work streams and coordination of projects | ✔ Completed |
|            | IPQR Module 10.3 - Project Roles and Responsibilities                                   | ✔ Completed |



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| Section    | Module Name   | Status                            |
|------------|---|-----------------------------------|
|            | IPQR Module 10.4 - Overview of key stakeholders and how influenced by your DSRIP projects | ✔ Completed                       |
|            | IPQR Module 10.5 - IT Requirements  | ✔ Completed                       |
|            | IPQR Module 10.6 - Performance Monitoring   | ✔ Completed                       |
|            | IPQR Module 10.7 - Community Engagement   | ✔ Completed                       |
|            | IPQR Module 10.8 - IA Monitoring  |                                   |
| Section 11 | IPQR Module 11.1 - Workforce Strategy Spending (Baseline)                                 | ✔ Completed                       |
|            | IPQR Module 11.2 - Prescribed Milestones  | ✔ Completed                       |
|            | IPQR Module 11.3 - PPS Defined Milestones   | ✔ Completed                       |
|            | IPQR Module 11.4 - Major Risks to Implementation & Risk Mitigation Strategies             | ✔ Completed                       |
|            | IPQR Module 11.5 - Major Dependencies on Organizational Workstreams                       | ✔ Completed                       |
|            | IPQR Module 11.6 - Roles and Responsibilities   | ✔ Completed                       |
|            | IPQR Module 11.7 - Key Stakeholders   | ✔ Completed                       |
|            | IPQR Module 11.8 - IT Expectations  | ✔ Completed                       |
|            | IPQR Module 11.9 - Progress Reporting   | ✔ Completed                       |
|            | IPQR Module 11.10 - Staff Impact  | ✔ Completed                       |
|            | IPQR Module 11.11 - Workforce Strategy Spending (Quarterly)                               | ✔ Completed                       |
|            |   | IPQR Module 11.12 - IA Monitoring |





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| Project ID | Module Name   | Status      |
|------------|---|-------------|
| 2.a.i      | IPQR Module 2.a.i.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 2.a.i.2 - Prescribed Milestones                                     | ✔ Completed |
|            | IPQR Module 2.a.i.3 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 2.a.i.4 - IA Monitoring   |             |
| 2.a.iii    | IPQR Module 2.a.iii.1 - Major Risks to Implementation and Mitigation Strategies | ✔ Completed |
|            | IPQR Module 2.a.iii.2 - Patient Engagement Speed                                | ✔ Completed |
|            | IPQR Module 2.a.iii.3 - Prescribed Milestones                                   | ✔ Completed |
|            | IPQR Module 2.a.iii.4 - PPS Defined Milestones                                  | ✔ Completed |
|            | IPQR Module 2.a.iii.5 - IA Monitoring   |             |
| 2.a.v      | IPQR Module 2.a.v.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 2.a.v.2 - Patient Engagement Speed                                  | ✔ Completed |
|            | IPQR Module 2.a.v.3 - Prescribed Milestones                                     | ✔ Completed |
|            | IPQR Module 2.a.v.4 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 2.a.v.5 - IA Monitoring   |             |
| 2.b.iii    | IPQR Module 2.b.iii.1 - Major Risks to Implementation and Mitigation Strategies | ✔ Completed |
|            | IPQR Module 2.b.iii.2 - Patient Engagement Speed                                | ✔ Completed |
|            | IPQR Module 2.b.iii.3 - Prescribed Milestones                                   | ✔ Completed |
|            | IPQR Module 2.b.iii.4 - PPS Defined Milestones                                  | ✔ Completed |
|            | IPQR Module 2.b.iii.5 - IA Monitoring   |             |
| 2.d.i      | IPQR Module 2.d.i.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 2.d.i.2 - Patient Engagement Speed                                  | ✔ Completed |
|            | IPQR Module 2.d.i.3 - Prescribed Milestones                                     | ✔ Completed |
|            | IPQR Module 2.d.i.4 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 2.d.i.5 - IA Monitoring   |             |
| 3.a.i      | IPQR Module 3.a.i.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 3.a.i.2 - Patient Engagement Speed                                  | ✔ Completed |
|            | IPQR Module 3.a.i.3 - Prescribed Milestones                                     | ✔ Completed |



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| Project ID | Module Name   | Status      |
|------------|---|-------------|
|            | IPQR Module 3.a.i.4 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 3.a.i.5 - IA Monitoring   |             |
| 3.a.ii     | IPQR Module 3.a.ii.1 - Major Risks to Implementation and Mitigation Strategies  | ✔ Completed |
|            | IPQR Module 3.a.ii.2 - Patient Engagement Speed                                 | ✔ Completed |
|            | IPQR Module 3.a.ii.3 - Prescribed Milestones                                    | ✔ Completed |
|            | IPQR Module 3.a.ii.4 - PPS Defined Milestones                                   | ✔ Completed |
|            | IPQR Module 3.a.ii.5 - IA Monitoring  |             |
| 3.b.i      | IPQR Module 3.b.i.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 3.b.i.2 - Patient Engagement Speed                                  | ✔ Completed |
|            | IPQR Module 3.b.i.3 - Prescribed Milestones                                     | ✔ Completed |
|            | IPQR Module 3.b.i.4 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 3.b.i.5 - IA Monitoring   |             |
| 3.d.iii    | IPQR Module 3.d.iii.1 - Major Risks to Implementation and Mitigation Strategies | ✔ Completed |
|            | IPQR Module 3.d.iii.2 - Patient Engagement Speed                                | ✔ Completed |
|            | IPQR Module 3.d.iii.3 - Prescribed Milestones                                   | ✔ Completed |
|            | IPQR Module 3.d.iii.4 - PPS Defined Milestones                                  | ✔ Completed |
|            | IPQR Module 3.d.iii.5 - IA Monitoring   |             |
| 4.b.i      | IPQR Module 4.b.i.1 - Major Risks to Implementation and Mitigation Strategies   | ✔ Completed |
|            | IPQR Module 4.b.i.2 - PPS Defined Milestones                                    | ✔ Completed |
|            | IPQR Module 4.b.i.3 - IA Monitoring   |             |
| 4.b.ii     | IPQR Module 4.b.ii.1 - Major Risks to Implementation and Mitigation Strategies  | ✔ Completed |
|            | IPQR Module 4.b.ii.2 - PPS Defined Milestones                                   | ✔ Completed |
|            | IPQR Module 4.b.ii.3 - IA Monitoring  |             |



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| Section   | Module Name / Milestone #   | Review Status   |   |
|---|---|---|---|
| Section 01  | Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY   | Pass & Ongoing  |   |
|   | Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)  | Pass & Ongoing  |   |
|   | Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY  | Pass & Ongoing  |   |
|   | Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)   | Pass & Ongoing  |   |
|   | Module 1.5 - Prescribed Milestones  |   |   |
|   | Milestone #1 Complete funds flow budget and distribution plan and communicate with network  | Pass & Complete   |   |
|   | Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)   | Pass & Ongoing  |   |
|   | Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)  | Pass & Ongoing  |   |
|   | Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)  | Pass & Ongoing  |   |
|   | Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)  | Pass & Ongoing  |   |
| Section 02  | Module 2.1 - Prescribed Milestones  |   |   |
|   | Milestone #1 Finalize governance structure and sub-committee structure  | Pass & Complete   |   |
|   | Milestone #2 Establish a clinical governance structure, including clinical quality committees for each DSRIP project  | Pass & Complete   |    |
|   | Milestone #3 Finalize bylaws and policies or Committee Guidelines where applicable  | Pass & Complete   |   |
|   | Milestone #4 Establish governance structure reporting and monitoring processes  | Pass & Complete   |    |
|   | Milestone #5 Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)                | Pass & Complete   |    |
|   | Milestone #6 Finalize partnership agreements or contracts with CBOs   | Pass & Complete   |    |
|   | Milestone #7 Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.) | Pass & Complete   |   |
|   | Milestone #8 Finalize workforce communication and engagement plan   | Pass & Complete   |    |
| Milestone #9 Inclusion of CBOs in PPS Implementation. | Pass & Complete   |   |   |
| Section 03  | Module 3.1 - Prescribed Milestones  |   |   |
|   | Milestone #1 Finalize PPS finance structure, including reporting structure  | Pass & Complete   |   |
|   | Milestone #2 Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.   | Pass & Complete   |   |



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|------------|--|-----------------|---|
|            | Milestone #3 Finalize Compliance Plan consistent with New York State Social Services Law 363-d   | Pass & Complete |   |
|            | Milestone #4 Develop a Value Based Payments Needs Assessment ("VNA")   | Fail            |    |
|            | Milestone #5 Develop an implementation plan geared towards addressing the needs identified within your VNA   | Pass & Ongoing  |    |
|            | Milestone #6 Develop partner engagement schedule for partners for VBP education and training   | Pass & Ongoing  |    |
|            | Milestone #7 ≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher | Pass & Ongoing  |   |
|            | Milestone #8 ≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher   | Pass & Ongoing  |   |
| Section 04 | Module 4.1 - Prescribed Milestones   |                 |   |
|            | Milestone #1 Finalize cultural competency / health literacy strategy.  | Pass & Complete |    |
|            | Milestone #2 Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).   | Pass & Complete |    |
| Section 05 | Module 5.1 - Prescribed Milestones   |                 |   |
|            | Milestone #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).   | Pass & Complete |    |
|            | Milestone #2 Develop an IT Change Management Strategy.   | Pass & Complete |    |
|            | Milestone #3 Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network   | Pass & Complete |    |
|            | Milestone #4 Develop a specific plan for engaging attributed members in Qualifying Entities  | Pass & Complete |   |
|            | Milestone #5 Develop a data security and confidentiality plan.   | Pass & Complete |   |
| Section 06 | Module 6.1 - Prescribed Milestones   |                 |   |
|            | Milestone #1 Establish reporting structure for PPS-wide performance reporting and communication.   | Pass & Complete |   |
|            | Milestone #2 Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.   | Pass & Complete |    |
| Section 07 | Module 7.1 - Prescribed Milestones   |                 |   |
|            | Milestone #1 Develop Practitioners communication and engagement plan.  | Pass & Complete |    |
|            | Milestone #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.   | Pass & Complete |    |
| Section 08 | Module 8.1 - Prescribed Milestones   |                 |   |



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|--|--|-----------------|--|
|  | Milestone #1 Develop population health management roadmap.   | Pass & Complete |  |
|  | Milestone #2 Finalize PPS-wide bed reduction plan.   | Pass & Complete |  |
| Section 09   | Module 9.1 - Prescribed Milestones   |                 |  |
|  | Milestone #1 Perform a clinical integration 'needs assessment'.  | Pass & Complete |  |
|  | Milestone #2 Develop a Clinical Integration strategy.  | Pass & Complete |  |
| Section 11   | Module 11.1 - Workforce Strategy Spending (Baseline)   | Pass & Complete |  |
|  | Module 11.2 - Prescribed Milestones  |                 |  |
|  | Milestone #1 Define target workforce state (in line with DSRIP program's goals).   | Pass & Complete |  |
|  | Milestone #2 Create a workforce transition roadmap for achieving defined target workforce state.   | Pass & Complete |  |
|  | Milestone #3 Perform detailed gap analysis between current state assessment of workforce and projected future state.   | Pass & Complete |  |
|  | Milestone #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. | Pass & Complete |  |
|  | Milestone #5 Develop training strategy.  | Pass & Complete |  |
|  | Module 11.10 - Staff Impact  | Pass & Ongoing  |  |
| Module 11.11 - Workforce Strategy Spending (Quarterly) | Pass & Ongoing   |                 |  |



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|------------|--|-----------------|--|
| 2.a.i      | Module 2.a.i.2 - Prescribed Milestones   |                 |  |
|            | Milestone #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. | Fail            |  |
|            | Milestone #2 Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.  | Pass & Complete |  |
|            | Milestone #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.   | Fail            |  |
|            | Milestone #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.                           | Fail            |  |
|            | Milestone #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.   | Fail            |  |
|            | Milestone #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.   | Pass & Complete |  |
|            | Milestone #7 Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.   | Fail            |  |
|            | Milestone #9 Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.  | Fail            |  |
|            | Milestone #10 Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.  | Pass & Complete |  |
|            | Milestone #11 Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as appropriate.  | Pass & Complete |  |
| 2.a.iii    | Module 2.a.iii.2 - Patient Engagement Speed  | Fail            |  |
|            | Module 2.a.iii.3 - Prescribed Milestones   |                 |  |
|            | Milestone #1 Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.   | Pass & Complete |  |
|            | Milestone #2 Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3.  | Fail            |  |
|            | Milestone #3 Ensure that all participating 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.  | Fail            |  |



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|------------|--|--|
|            | Milestone #4 Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.  | Fail    |
|            | Milestone #5 Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.   | Pass & Complete    |
|            | Milestone #6 Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.   | Pass & Complete    |
|            | Milestone #7 Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.   | Fail    |
|            | Milestone #8 Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).  | Fail    |
|            | Milestone #9 Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.   | Pass & Complete    |
| 2.a.v      | Module 2.a.v.2 - Patient Engagement Speed  | Fail     |
|            | Module 2.a.v.3 - Prescribed Milestones   |  |
|            | Milestone #1 Transform outdated (underperforming) nursing home capacity into a stand-alone emergency department/urgent care center or other healthcare-related purpose.  | Pass & Ongoing   |
|            | Milestone #2 Provide a clear statement of how the infrastructure transformation program will promote better service and outcomes (service volume, occupancy statistics, etc.) for the community based upon the community needs assessment including, evaluation of specific planning needs for any Naturally Occurring Retirement Community (NORC) occurring within the PPS. | Pass & Complete    |
|            | Milestone #3 Provide a clear description of how this re-configured facility will fit into a broader integrated delivery system that is committed to high quality care and willing/able to participate in payment reform.   | Pass & Complete    |
|            | Milestone #4 Provide clear documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal requirements.   | Pass & Complete    |
|            | Milestone #5 Identify specific community-based services that will be developed in lieu of these beds based upon the community need.  | Pass & Complete    |
|            | Milestone #6 Use EHRs and other technical platforms to track all patients engaged in the project.  | Pass & Complete    |
|            | Milestone #7 Ensure that all eligible participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.  | Pass & Ongoing   |
|            | Milestone #8 Ensure that all safety net providers participating in medical villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.  | Pass & Ongoing   |
| 2.b.iii    | Module 2.b.iii.2 - Patient Engagement Speed  | Fail     |
|            | Module 2.b.iii.3 - Prescribed Milestones   |  |



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|---|---|----------------------------------|----|
|   | Milestone #1 Establish ED care triage program for at-risk populations   | Pass & Complete                  |    |
|   | Milestone #2 Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.<br>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.<br>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.<br>c. Ensure real time notification to a Health Home care manager as applicable  | Fail                             | IA |
|   | Milestone #3 For patients presenting with minor illnesses who do not have a primary care provider:<br>a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.<br>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.<br>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care provider). | Pass & Complete                  |    |
|   | Milestone #4 Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)  | Pass (with Exception) & Complete | IA |
|   | Milestone #5 Use EHRs and other technical platforms to track all patients engaged in the project.   | Pass & Complete                  |    |
|   | Module 2.d.i.2 - Patient Engagement Speed   | Fail                             | IA |
| Module 2.d.i.3 - Prescribed Milestones  |   |                                  |    |
| 2.d.i   | Milestone #1 Contract or partner with community-based organizations (CBOs) to engage target populations using PAM(R) and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.  | Pass & Ongoing                   |    |
|   | Milestone #2 Establish a PPS-wide training team, comprised of members with training in PAM(R) and expertise in patient activation and engagement.   | Pass & Complete                  | IA |
|   | Milestone #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.  | Pass & Complete                  | IA |
|   | Milestone #4 Survey the targeted population about healthcare needs in the PPS' region.  | Pass & Complete                  | IA |
|   | Milestone #5 Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.   | Pass & Ongoing                   |    |
| Milestone #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).<br>• This patient activation project should not be used as a mechanism to inappropriately move members to different health plans and PCPs, but rather, shall focus on establishing connectivity to resources already available to the member.<br>• Work with respective MCOs and PCPs to ensure proactive outreach to beneficiaries. Sufficient information must be provided regarding insurance coverage, language resources, and availability of primary and preventive care services. The state must review and approve any educational materials, which must comply with state marketing guidelines and federal regulations as | Pass & Complete   | IA                               |    |





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|------------|---|----------------------------------|---|
|            | outlined in 42 CFR §438.104.  |                                  |   |
|            | Milestone #7 Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM(R) 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.  | Pass & Ongoing                   |   |
|            | Milestone #8 Include beneficiaries in development team to promote preventive care.  | Pass & Complete                  |     |
|            | Milestone #9 Measure PAM(R) components, including: <ul style="list-style-type: none"> <li>• Screen patient status (UI, NU and LU) and collect contact information when he/she visits the PPS designated facility or "hot spot" area for health service.</li> <li>• If the beneficiary is UI, does not have a registered PCP, or is attributed to a PCP in the PPS' network, assess patient using PAM(R) survey and designate a PAM(R) score.</li> <li>• Individual member's score must be averaged to calculate a baseline measure for that year's cohort.</li> <li>• The cohort must be followed for the entirety of the DSRIP program.</li> <li>• On an annual basis, assess individual members' and each cohort's level of engagement, with the goal of moving beneficiaries to a higher level of activation. <ul style="list-style-type: none"> <li>• If the beneficiary is deemed to be LU &amp; NU but has a designated PCP who is not part of the PPS' network, counsel the beneficiary on better utilizing his/her existing healthcare benefits, while also encouraging the beneficiary to reconnect with his/her designated PCP.</li> </ul> </li> <li>• The PPS will NOT be responsible for assessing the patient via PAM(R) survey.</li> <li>• PPS will be responsible for providing the most current contact information to the beneficiary's MCO for outreach purposes.</li> <li>• Provide member engagement lists to relevant insurance companies (for NU &amp; LU populations) on a monthly basis, as well as to DOH on a quarterly basis.</li> </ul> | Pass & Ongoing                   |   |
|            | Milestone #10 Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.  | Pass & Ongoing                   |   |
|            | Milestone #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.  | Pass & Ongoing                   |   |
|            | Milestone #12 Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.   | Pass & Complete                  |     |
|            | Milestone #13 Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM(R).   | Pass (with Exception) & Complete |    |
|            | Milestone #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 resources.   | Pass & Ongoing                   |   |
|            | Milestone #15 Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.   | Pass & Ongoing                   |   |
|            | Milestone #16 Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.  | Pass & Ongoing                   |   |
|            | Milestone #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.   | Pass & Complete                  |     |



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|--|---|-----------------|--|
| 3.a.i  | Module 3.a.i.2 - Patient Engagement Speed   | Fail            |  |
|  | Module 3.a.i.3 - Prescribed Milestones  |                 |  |
|  | Milestone #1 Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3. | Pass & Ongoing  |  |
|  | Milestone #2 Develop collaborative evidence-based standards of care including medication management and care engagement process.  | Pass & Complete |  |
|  | Milestone #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.                        | Pass & Ongoing  |  |
|  | Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.   | Pass & Complete |  |
|  | Milestone #5 Co-locate primary care services at behavioral health sites.  | Pass & Ongoing  |  |
|  | Milestone #6 Develop collaborative evidence-based standards of care including medication management and care engagement process.  | Pass & Complete |  |
|  | Milestone #7 Conduct preventive care screenings, including physical and behavioral health screenings.   | Pass & Ongoing  |  |
|  | Milestone #8 Use EHRs or other technical platforms to track all patients engaged in this project.   | Pass & Complete |  |
|  | Milestone #9 Implement IMPACT Model at Primary Care Sites.  | Pass & Ongoing  |  |
|  | Milestone #10 Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.                                      | Pass & Complete |  |
|  | Milestone #11 Employ a trained Depression Care Manager meeting requirements of the IMPACT model.  | Pass & Complete |  |
|  | Milestone #12 Designate a Psychiatrist meeting requirements of the IMPACT Model.  | Pass & Complete |  |
|  | Milestone #13 Measure outcomes as required in the IMPACT Model.   | Pass & Ongoing  |  |
| Milestone #14 Provide "stepped care" as required by the IMPACT Model.  | Pass & Ongoing  |                 |  |
| Milestone #15 Use EHRs or other technical platforms to track all patients engaged in this project.           | Pass & Complete   |                 |  |
| 3.a.ii   | Module 3.a.ii.2 - Patient Engagement Speed  | Fail            |  |
|  | Module 3.a.ii.3 - Prescribed Milestones   |                 |  |
|  | Milestone #1 Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.   | Pass & Ongoing  |  |
|  | Milestone #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.                            | Pass & Ongoing  |  |
|  | Milestone #3 Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.  | Pass & Ongoing  |  |
| Milestone #4 Develop written treatment protocols with consensus from participating providers and facilities. | Pass & Complete   |                 |  |



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|--|--|---|
|  | Milestone #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.  | Pass & Complete   |
|  | Milestone #6 Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).   | Pass & Ongoing  |
|  | Milestone #7 Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.  | Pass & Ongoing  |
|  | Milestone #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. | Pass & Ongoing  |
|  | Milestone #9 Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.  | Pass & Ongoing  |
|  | Milestone #10 Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.   | Pass & Complete   |
|  | Milestone #11 Use EHRs or other technical platforms to track all patients engaged in this project.   | Pass & Complete   |
| 3.b.i  | Module 3.b.i.2 - Patient Engagement Speed  | Fail              |
|  | Module 3.b.i.3 - Prescribed Milestones   |   |
|  | Milestone #1 Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.   | Pass & Complete   |
|  | Milestone #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.                   | Fail   |
|  | Milestone #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.   | Fail   |
|  | Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.  | Pass & Complete   |
|  | Milestone #5 Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).  | Fail          |
|  | Milestone #6 Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.  | Pass & Complete   |
|  | Milestone #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.   | Pass & Complete   |
|  | Milestone #8 Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.  | Pass & Complete   |
|  | Milestone #9 Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.  | Fail          |
| Milestone #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. | Fail    |   |



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**Albany Medical Center Hospital (PPS ID:1)**

| Project ID | Module Name / Milestone #   | Review Status   |  |
|------------|---|-----------------|--|
|            | Milestone #11 Prescribe once-daily regimens or fixed-dose combination pills when appropriate.   | Fail            |  |
|            | Milestone #12 Document patient driven self-management goals in the medical record and review with patients at each visit.   | Pass & Complete |  |
|            | Milestone #13 Follow up with referrals to community based programs to document participation and behavioral and health status changes.  | Pass & Complete |  |
|            | Milestone #14 Develop and implement protocols for home blood pressure monitoring with follow up support.  | Fail            |  |
|            | Milestone #15 Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.  | Fail            |  |
|            | Milestone #16 Facilitate referrals to NYS Smoker's Quitline.  | Fail            |  |
|            | Milestone #17 Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases.                     | Fail            |  |
|            | Milestone #18 Adopt strategies from the Million Hearts Campaign.  | Fail            |  |
|            | Milestone #19 Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.   | Fail            |  |
|            | Milestone #20 Engage a majority (at least 80%) of primary care providers in this project.   | Fail            |  |
| 3.d.iii    | Module 3.d.iii.2 - Patient Engagement Speed   | Fail            |  |
|            | Module 3.d.iii.3 - Prescribed Milestones  |                 |  |
|            | Milestone #1 Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management. | Fail            |  |
|            | Milestone #2 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.   | Fail            |  |
|            | Milestone #3 Deliver educational activities addressing asthma management to participating primary care providers.   | Pass & Complete |  |
|            | Milestone #4 Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.   | Fail            |  |
|            | Milestone #5 Use EHRs or other technical platforms to track all patients engaged in this project.   | Pass & Complete |  |
| 4.b.i      | Module 4.b.i.2 - PPS Defined Milestones   | Pass & Ongoing  |  |
| 4.b.ii     | Module 4.b.ii.2 - PPS Defined Milestones  | Pass & Ongoing  |  |



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**Providers Participating in Projects**

|                            | Selected Projects |                 |               |                 |               |               |                |               |                 |               |                |
|----------------------------|-------------------|-----------------|---------------|-----------------|---------------|---------------|----------------|---------------|-----------------|---------------|----------------|
|                            | Project 2.a.i     | Project 2.a.iii | Project 2.a.v | Project 2.b.iii | Project 2.d.i | Project 3.a.i | Project 3.a.ii | Project 3.b.i | Project 3.d.iii | Project 4.b.i | Project 4.b.ii |
| Provider Speed Commitments | DY2 Q2            | DY2 Q4          | DY3 Q4        | DY2 Q2          | DY3 Q4        | DY3 Q2        | DY3 Q2         | DY2 Q2        | DY2 Q2          |               |                |

| Provider Category                              |            | Project 2.a.i        | Project 2.a.iii      | Project 2.a.v        | Project 2.b.iii      | Project 2.d.i        | Project 3.a.i        | Project 3.a.ii       | Project 3.b.i        | Project 3.d.iii      | Project 4.b.i        | Project 4.b.ii       |     |       |    |       |     |       |     |       |   |       |   |
|--|------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|-----|-------|----|-------|-----|-------|-----|-------|---|-------|---|
|  |            | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed |     |       |    |       |     |       |     |       |   |       |   |
| Practitioner - Primary Care Provider (PCP)     | Total      | 490                  | 469                  | 319                  | 469                  | 205                  | -                    | 315                  | -                    | 406                  | -                    | 420                  | 171 | 265   | -  | 319   | 469 | 424   | 469 | 408   | - | 418   | - |
|  | Safety Net | 33                   | 47                   | 26                   | 47                   | 9                    | 47                   | 22                   | 47                   | 20                   | 47                   | 23                   | 47  | 12    | 47 | 26    | 47  | 29    | 47  | 22    | - | 26    | - |
| Practitioner - Non-Primary Care Provider (PCP) | Total      | 1,769                | 1,469                | 1,220                | 1,469                | 516                  | -                    | 1,204                | -                    | 1,231                | -                    | 1,247                | 0   | 1,099 | -  | 1,187 | 188 | 1,119 | 14  | 1,235 | - | 1,251 | - |
|  | Safety Net | 50                   | 79                   | 21                   | 79                   | 5                    | 16                   | 24                   | -                    | 26                   | 79                   | 27                   | 0   | 18    | 0  | 20    | 25  | 14    | 53  | 26    | - | 23    | - |
| Hospital                                       | Total      | 4                    | 2                    | 3                    | -                    | 1                    | -                    | 3                    | -                    | 3                    | -                    | 3                    | -   | 3     | -  | 3     | -   | 3     | -   | 3     | - | 3     | - |
|  | Safety Net | 3                    | 2                    | 2                    | -                    | 0                    | -                    | 2                    | 2                    | 2                    | 2                    | 2                    | -   | 2     | 2  | 2     | -   | 2     | -   | 2     | - | 2     | - |
| Clinic   | Total      | 16                   | 17                   | 8                    | 5                    | 2                    | -                    | 8                    | -                    | 13                   | -                    | 8                    | 7   | 6     | -  | 7     | 17  | 6     | 0   | 11    | - | 11    | - |
|  | Safety Net | 10                   | 13                   | 6                    | 9                    | 0                    | 1                    | 6                    | 13                   | 8                    | 13                   | 6                    | 13  | 4     | 13 | 5     | 13  | 4     | 5   | 8     | - | 8     | - |
| Case Management / Health Home                  | Total      | 25                   | 13                   | 15                   | 8                    | 4                    | -                    | 15                   | -                    | 14                   | -                    | 12                   | -   | 17    | -  | 9     | 13  | 4     | 0   | 19    | - | 17    | - |
|  | Safety Net | 10                   | 8                    | 7                    | 8                    | 0                    | 0                    | 5                    | 8                    | 3                    | -                    | 5                    | -   | 7     | 0  | 2     | 8   | 1     | 3   | 7     | - | 6     | - |
| Mental Health                                  | Total      | 167                  | 139                  | 87                   | 139                  | 23                   | -                    | 81                   | -                    | 89                   | -                    | 93                   | 48  | 97    | -  | 66    | 48  | 61    | -   | 97    | - | 97    | - |
|  | Safety Net | 27                   | 34                   | 14                   | 34                   | 1                    | 2                    | 12                   | -                    | 15                   | -                    | 14                   | 34  | 18    | 34 | 6     | 34  | 4     | -   | 17    | - | 16    | - |
| Substance Abuse                                | Total      | 11                   | 14                   | 2                    | 14                   | 2                    | -                    | 0                    | -                    | 2                    | -                    | 6                    | 14  | 6     | -  | 1     | 14  | 1     | -   | 6     | - | 6     | - |
|  | Safety Net | 11                   | 14                   | 2                    | 14                   | 2                    | 0                    | 0                    | -                    | 2                    | -                    | 6                    | 14  | 6     | 14 | 1     | 14  | 1     | -   | 6     | - | 6     | - |
| Nursing Home                                   | Total      | 10                   | 38                   | 2                    | -                    | 5                    | -                    | 2                    | -                    | 2                    | -                    | 2                    | -   | 2     | -  | 2     | -   | 1     | -   | 2     | - | 2     | - |
|  | Safety Net | 9                    | 34                   | 2                    | -                    | 4                    | 12                   | 2                    | -                    | 2                    | -                    | 2                    | -   | 2     | -  | 2     | -   | 1     | -   | 2     | - | 2     | - |
| Pharmacy                                       | Total      | 4                    | 72                   | 3                    | 0                    | 1                    | -                    | 4                    | -                    | 4                    | -                    | 4                    | -   | 3     | -  | 3     | 72  | 3     | 72  | 4     | - | 3     | - |
|  | Safety Net | 2                    | 1                    | 1                    | 0                    | 0                    | 1                    | 2                    | -                    | 2                    | 1                    | 2                    | -   | 1     | -  | 1     | 1   | 1     | 1   | 2     | - | 1     | - |
| Hospice  | Total      | 0                    | 0                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -   | 0     | -  | 0     | -   | 0     | -   | 0     | - | 0     | - |



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| Provider Category             |            | Project 2.a.i        |                      | Project 2.a.iii      |                      | Project 2.a.v        |                      | Project 2.b.iii      |                      | Project 2.d.i        |                      | Project 3.a.i        |                      | Project 3.a.ii       |                      | Project 3.b.i        |                      | Project 3.d.iii      |                      | Project 4.b.i        |                      | Project 4.b.ii       |                      |
|-------------------------------|------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
|                               |            | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed | Selected / Committed |
|                               | Safety Net | 0                    | 0                    | 0                    | -                    | 0                    | 0                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    |
| Community Based Organizations | Total      | 27                   | 35                   | 4                    | 12                   | 18                   | -                    | 5                    | -                    | 8                    | -                    | 3                    | 0                    | 4                    | -                    | 0                    | 0                    | 3                    | 0                    | 5                    | -                    | 4                    | -                    |
|                               | Safety Net | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    |
| All Other                     | Total      | 1,539                | 1,066                | 1,062                | 140                  | 564                  | -                    | 1,076                | -                    | 1,171                | -                    | 1,183                | 0                    | 904                  | -                    | 1,074                | 0                    | 1,160                | 0                    | 1,196                | -                    | 1,209                | -                    |
|                               | Safety Net | 100                  | 117                  | 51                   | 92                   | 19                   | 15                   | 53                   | -                    | 50                   | 117                  | 51                   | 0                    | 37                   | 0                    | 53                   | 0                    | 52                   | 20                   | 62                   | -                    | 63                   | -                    |
| Uncategorized                 | Total      | 246                  | -                    | 211                  | -                    | 104                  | -                    | 204                  | -                    | 208                  | -                    | 213                  | -                    | 188                  | -                    | 155                  | -                    | 146                  | -                    | 204                  | -                    | 211                  | -                    |
|                               | Safety Net | 6                    | -                    | 5                    | -                    | 4                    | -                    | 6                    | -                    | 5                    | -                    | 5                    | -                    | 6                    | -                    | 0                    | -                    | 1                    | -                    | 6                    | -                    | 6                    | -                    |
| Additional Providers          | Total      | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    |
|                               | Safety Net | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    | 0                    | -                    |

**Additional Project Scale Commitments**

**Instructions:**

Please indicate the scale of the categories below that meet all of the project requirements committed to in the Project Plan Application. Documentation must be submitted in Excel format in the quarter when the PPS provider speed commitments for a particular project are due. This documentation should include the target category(e.g. Medical Villages, Emergency Departments with Care Triage, Community-based navigators, etc.), the project ID(e.g. 2.a.iv,2.a.v,3.a.ii, etc.), and the name of the providers/entities/individuals associated with this project, if applicable.

| Project Scale Category                                      | Project | Selected | Committed |
|---|---------|----------|-----------|
| Expected Number of Medical Villages Established             | 2.a.v   | 0        | 4         |
| Emergency Departments with Care Triage                      | 2.b.iii | 3        | 4         |
| PAM(R) Providers  | 2.d.i   | 0        | 68        |
| Expected Number of Crisis Intervention Programs Established | 3.a.ii  | 0        | 4         |

\* Safety Net Providers in Green

| Participating in Projects |  |       |         |       |         |       |       |        |       |         |       |        |  |
|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Belding Alfred Md         | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gross Eric J Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Farrell Richard Md Jr     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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| Participating in Projects     |  |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Millora Angel B Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Leyhane James C Md            | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Richman Charles H Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Malone Anthony F Md           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Petersen William A Md         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Irwin Michael R Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kamath Marian D Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bertram Michael C Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Fruiterman Mark L Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Thompson Dean A Md            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Bello Scott C Md              | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Chin Yin Lee Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Toll Richard B Md             | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mitta Swatantra K Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Harde Hasmukh C Md            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Browne William F Md           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Litts Warren C Jr Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Agopovich Arsenio Md          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Zeltner Theodore Harold Md    | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Walders James D Md            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Woods Norbert J Md            | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Glasgow Constance Lenore Mdpc | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Patil Nagaraja N Md           | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Fruiterman Roy Md             | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Baselice Marino Md            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Capalbo Ralph H               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Patel Vina R Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Fusco Joseph J Md             | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Ford Bradley A Md             | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Saperstone James D Md         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Busino William A Jr Md        | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |



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\* Safety Net Providers in Green

| Participating in Projects     |   |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|---|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                                 | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Strader Stephen Earl Md       | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Alegre Catalina               | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wolff Michael Leonard Md      | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Marshall Robert Andrew Md     | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| <b>Tomiak Henry P Jr Md</b>   | <b>Practitioner - Primary Care Provider (PCP)</b> | ✓     |         |       | ✓       | ✓     | ✓     | ✓      |       | ✓       | ✓     |        |
| Hauer David I Md              | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Nebres Jose F Md              | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Siniapkin George C Md         | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kolanchick Gary J Md          | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Phelps David Millard Md       | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rios Zandra M Md              | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Haqqie Syed S Md              | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Musto Ronald V Md             | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Weissberg Robert A Md         | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Goddard Bryan L Md            | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Cioffi James Michael Md       | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Semlear Robert Dwight Md      | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Nolan Florence A Md           | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sullivan Andrew Md            | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lieberman Ruth L Md           | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Monkash Jeff Ira Md           | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| <b>Litwa Wallin J Do</b>      | <b>Practitioner - Primary Care Provider (PCP)</b> | ✓     |         |       |         |       |       |        |       |         |       |        |
| Conlon Alan T Md              | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Mihindukulasuriya Joseph C Md | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hoy Christopher Dion Md       | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sonnekalb Michael P Md        | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| <b>Friedman Ross Md</b>       | <b>Practitioner - Primary Care Provider (PCP)</b> |       |         |       |         |       |       |        |       |         |       |        |
| Calamia Vincent Md            | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Busch Robert Steven Md        | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jue Donald Md                 | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Khan Noor Zaman Md            | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |





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| Participating in Projects        |   |       |         |       |         |       |       |        |       |         |       |        |
|----------------------------------|---|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                    | Provider Category                                 | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Orsi Richard A Md                | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| <b>Voleti Venkateswararao Md</b> | <b>Practitioner - Primary Care Provider (PCP)</b> |       |         |       |         |       |       |        |       |         |       |        |
| Caramore William J Md            | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rosenberger John Daniel Md       | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Grant Stephen A Md               | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Pagnotta Inez Md                 | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Schnide Kenneth Ben Md           | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sorum Paul C Md                  | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Caulfield Patrick Francis Md     | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Mitnick Neil Craig Md            | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Snitkoff Louis Md                | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Baillargeon Neal Arthur Md       | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Goldberg Steven Marc Md          | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Sacolick Benzion Md              | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Daggett Brian George Md          | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Neilley Henry Md                 | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |
| Gelman Leonard M Md              | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Halbig Robert Joseph Md          | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stevens Arthur L Md              | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Kao Wei Md                       | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Walker Michael Francis Md        | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Condy Angela G Md                | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Johnston Mary Md                 | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Vachon Francois Marc Andre Md    | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| <b>Buff Daniel David Md</b>      | <b>Practitioner - Primary Care Provider (PCP)</b> |       |         |       |         |       |       |        |       |         |       |        |
| Burchell Randall Lawrence Md     | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gupta Sindhu Md Pc               | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Buff Christopher Md              | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Putman William Erskine M Md      | Practitioner - Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Lecours Laura Yates Md           | Practitioner - Primary Care Provider (PCP)        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Tetreault William Robert Md      | Practitioner - Primary Care Provider (PCP)        | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |



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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Marinello Anthony James Md  | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Spinelli Karen Ann Md       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Talma Theodore E Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Davis George Fabyan Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kineke Stephen Francis Md   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Wong Winston C Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Duff Thomas Edward Jr Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kronick Gary Archer Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Yan Richard                 | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Ray David Allan Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Quarrier John V Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Schumacher Cajsza J Md      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Dufresne W J Duke Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Rienzi Peter Anthony Md     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Marthy-Noonan Anne K Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Dorsey Susan Serra Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Herman David L Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Salehi Freshteh Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gilroy Shelley Ann Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Haber Eugene Curtis Md      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mirza Shahida Parveen Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Schwartz Kenneth Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fuhrman Solomon M Md        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Nielson Robert P Jr Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Golden Owen Md              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Flatau Irene Ruth Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Anand Vinod Md              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Morin Michael P Md          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Skory David S Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Warszawa-Ambros Maryla A Md | Practitioner - Primary Care Provider (PCP) | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Dort Janice Beth            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |



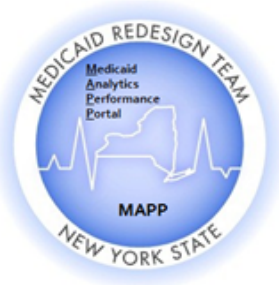
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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Arnold Hendrick Jr Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Miller Cynthia H Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pascual Arsenio George Md     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Bedford Sharon L Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Thomas Christopher W Md       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Merecki Eugene Karl Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Spingarn David H Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Patel Nileshkumar Gokal Md    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Balot Barry Hal Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Viola Theresa Md              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Morris Barbara A Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Thorn Lisa Marie Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Knapp George Sterling Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Schnakenberg Eric C Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pezzulo John Phillip Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fishel Stephen C Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lee Arthur Farren Md Pc       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Higgins Elizabeth A Md        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Moran Antoinette Collins Rpac | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Justa Shelley Md              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Ferrando-Ross Pedro I Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fish Douglas G Md             | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Costello Kevin B Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gaylord James Md              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Fusella Joseph Li Do          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Ianniello Louis Md            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Lee Josephine M Md            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Liporace Ralph L Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Sacco Joseph P Md             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bevilacqua Lisa Rose Md       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mckeeon Elisabeth Waterman Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



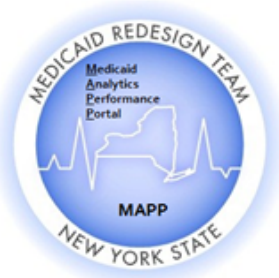
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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Woods Margaret Mary Md      | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Volfinzon Leonid Medical Pc | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Mitkoff Nathan B Md         | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Sipperly Stephen F Do       | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Tallman Mark Patrick        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Moore Susan Elaine Md       | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Zabinski-Kramer Kathleen Md | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Benoit Marcel M Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Yousuf Asim Md              | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Baghel Ashok Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Signor Connie J             | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Livshits Aleksandr Md       | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Roche Sean Patrick Md       | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Shustarovich Alla Md Pc     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Chava Prabhakar Rao Md      | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Cotugno Steffani Do         | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Sirico Theresa A Do         | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Diaz Miguel Remigio Md      | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Schynoll Gerald Klaus Md    | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Hawthorne Jami M            | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Merkhan Samuel Kabriyel Md  | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Ali Shehzad                 | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Bakst Gary Md               | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Battu Vasantha Kumari       | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gerety Gregg F Md           | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Krizar Stephen Lewis Md     | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Parikh Nita S               | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Tietgens Sharon T Md        | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Sagar Sushil Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Brennan Tracey Lynn Md      | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Taneja Sanjay Md            | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |



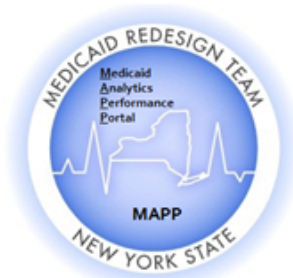
**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects    |  |       |         |       |         |       |       |        |       |         |       |        |
|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Feygin Polina Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Diaz Alan                    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Allard Ingrid M Md           | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Chowdary Sunita Kollu Md     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Cirenza Emanuel Nicholas Md  | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Paeglow Robert John Md       | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Azad Abul Kazam Md           | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Baldini Gleda P Md           | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Rosales Manuel Ramos Md      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| O'Brien Joanne Elizabeth     | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Kamath Sachin Narsinha Md    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Patel Mahendra Ambalal Md    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ramani Ananthakrishnan Md    | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Eldeiry Samer S Md           | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Watsky Jay G Md              | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Lenefsky Ronald I Md         | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Gebhard Paul E Jr Md         | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Nussbaum Jack Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hogan-Moulton Amy E Md       | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Bala Virinchi                | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       |         |       |       |        | ☑     | ☑       |       | ☑      |
| Donohue Robert               | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Wright Stuart B Md           | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Byron Paul Joseph            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Alarcon Gabriel Baldomero Md | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Murphy William Patrick Md    | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Drzymalski Zofia Wanda Md    | Practitioner - Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Gandham Vijaya L Md          | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Robie Kristin                | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hanley Audra J Md            | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Kudria Inna Md               | Practitioner - Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Kelleher Ruth Ellen          | Practitioner - Primary Care Provider (PCP) | ☑     |         |       | ☑       |       | ☑     |        |       | ☑       | ☑     |        |



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| Participating in Projects     |  |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Lindman Harry David Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pintauro Robert               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Murphy Christine M Md         | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sahgal Sumir P Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Evans Stephanie B Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shetty Tharun                 | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Howard Elizabeth A Md         | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Gaston Shenelle R Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Zimring Debra Carol Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Jacobson Kirsten Elizabeth Md | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Brueggemann Christina Mchugh  | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mead Daniel H Pa              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Tonneau Benoit Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ricker Kerry Elizabeth Do     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Jorgensen Stephanie E Md      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Gupta Saaket Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Zhou Peipei Md                | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sherwood David Edward Md      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Aitken Geri Lynn Do           | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| James Philip C Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Johnson Charles A Do          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Cardiel Alexander Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Palmieri Suzanne Do           | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Domnich Ilya Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shulof Jennifer Amy           | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Price Darin Michael Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hunter Philip Raymond Md      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pope Ronald James Do          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Karatnycky Adrian Paul Md     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pelnik-Fecko Tricia Ann Md    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shur Irina N Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Wayne Joseph T Md             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Carrelle Raymond J Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Wise Birute Marija Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Hochster Howard James Md      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Lemons Lorraine S Do          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Pribis Anneke B Md            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Gradner Jill A Md             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pierce Jean Catherine Rpa     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Conway Lillian Marie          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Puthuparampil Beulah J Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Dooley Kevin M Md             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Muller Susan Marie Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Meltz Theresa Ann Rpac        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Giantinoto Salvatore J Do     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Eaton Carolyn A Md            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Natalenko Irina Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Braungart Carol Fritz         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Braden Diane Beers            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Maheshwari Anil               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Greenblatt Michael J Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Seaman Tami Md                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Santoro Carol Rinko Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Getzke Nancy L Np             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chakraborty Ranen Kumar Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Chan Cindy Hoying Md          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Assevero Anna-Maria D Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Navarro Brian Scott Md        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Rovere Rena Marie             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Carrasco Andrea Y Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hechanova Arnel B Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rodriguez-Goodemot Renee B Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Price Marc David Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Borden Eric Charles Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gutnik Igor Md            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Cahill Ryan M Do          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Janowski Darcy A          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Morse Joyce               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| O'Loughlin Suzanne        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Olszewski Peter           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Rabbin Linda S            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Santoro Eileen            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Warner Deborah P          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Erlikh Tamara Md          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Enzien Ernest M Jr Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| O'Brien Michael F         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Roske Julia H Rpa         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Sgarlata Donna L          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Hyland Maureen Annette    | Practitioner - Primary Care Provider (PCP) | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Nicholson Timothy Joseph  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Phelan Carol Beberwyk     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Meyer Vincent Edwin Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Malin Julia Md            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mustafa Marianne A Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Flik Anna Grattan Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kondo Kathleen            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Miller Marilyn            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Cloney Holly K Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Gurralla Geetha Md        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Cleveland Byrd Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kim Regina Y Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bogdanov Assen Petrov Md  | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Marici Kathleen Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |





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**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects   |  |       |         |       |         |       |       |        |       |         |       |        |  |
|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Schottler-Thal Carrin Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Breen Martin Md             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Haldeman Iii Richard J      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Yadegari-Lewis Nasrene Md   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Brady Helen H               | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Murray Amy J                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Aragona Sharon L            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Makavana Jayeshkumar J Md   | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gabay Michelle              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Mortazavi Shervin Md        | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Tolentino Rommel M Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Greenblatt Carol Lynn Do    | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mance Joan M                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Martin Kristen Hedger Md    | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Oke Benjamin                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Cossey Jason L              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lehine Tanya                | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Santiago Allan Realin Md    | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Sethi Dinesh Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Jellinger Robert M Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Berman Jessica Dembitz Md   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Campagna Kristine J Do      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Gildersleeve Rebecca Ann Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Shpak Mikhail M Do          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Barats Lev Leonidovich Md   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Lindstrom Jennifer E Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mcgaffin Christina E        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| D'Avella Wendy K            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Horn Elizabeth C            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Irani Danesh S Rpa          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kamal Syed Anwar Md         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |



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|----------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                    | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Kerr Hamish Alistair Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hickey Lynn Leitner Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Flanagan Jean Ansari Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pomichter John Stanley Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Compa Kristen Leigh Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mijovic-Das Snezana Ana H        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Sami Arshad Md                   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Leonidas Leonard Al Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Ludwig Samantha Md               | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pawlinga Christophe              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Clark Melinda Beth Md            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Steckley Renee E Rpa             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Borrelli Karin                   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Janice Prime Care Medical Pc     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Hill Linda J Do                  | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Winchester Susan B Np            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Samedov Nikolay Md               | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Stetzer Rebecca                  | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kucij Lyn Irene Rpa              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Szilak Illya                     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Sgambati Carl Willard Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Verrico Ivelisse Ann Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Katz Linda G Np                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Broderick Bethany Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Faroqui Fazal G Do               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Burke Michael Kevin Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Owen Claudina                    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hobbs Patricia                   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Rodden Mary Np                   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Auld Clara Stringer              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Greenfield Country Medicine Pllc | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|---------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                   | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Osborn Kyle Thomas Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Deckelbaum Scott Howard Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Greenwald Lisa                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Noori Khalid A Md               | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Wasniewski Holly L Md           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Kucherina Andrey Md             | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Vasquez Deborah A Md            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Barillas-Arias Lilliana Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bleser Karen Md                 | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Beauchamp Cara E Rpa            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Raveendranath Brooke A          | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Smith Marsha                    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Smitas Catherine Malone Md      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Lahtinen-Aley Kristina Marie Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Neubert Stefanie S              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Doyle Robin M Md                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Butterfield Rebecca C Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dougherty Katherine             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Noyes Kimberly                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dhanani Rahim Md                | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Eldredge Daniel                 | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Stetzer Lee                     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Salimah Dhanani Md              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Craig Maier                     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Elguero Carlos                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mack Brigid                     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Marshall Ryan                   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Culp Anita                      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gabree Samara                   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rosenbaum Elena                 | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Gardner Nathan James Rpa        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |



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|----------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                    | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Monserrate Nicole Marie Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Norton Neal David Jr Rpa         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Orlovskiy Aleksandr Md           | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Saxena Amit K Md                 | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Vollmer Kelly J                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Rimmer Linda Marie Gawronski     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| De Waal Malefyt Stephen Karel Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Patel Umesh                      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Abigail R Watson                 | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shpitalnik Larisa                | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Locke Elizabeth Anne Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Chasin Zacharias                 | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Emily Knuth                      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Barry Kelli Ann                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mekosh Susan Lynn                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Cerone Jennifer Rebecca Boden    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shukurova Zukhra                 | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Omeara Shannon Lauren            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Parker Dawne Louise              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Denny Martin                     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Brilliant Rachelle I             | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kanthal Marissa Loren            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Brown Sheryl                     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Obeid Leila Ann                  | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gowdara Divakara Murthy Md       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Saha Manish                      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Alin Avi                         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hart Ashley Rose                 | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rutter Ann                       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Guptill Gloria G                 | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Cohen Erik                       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|--------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                  | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Dvorscak Amanda Jayne          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Ordogh Debbie                  | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Iqbal Adeel Azmat              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Reed Monica Renee              | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lynch Meghan Margaret Jude     | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Besong Alice                   | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Shin Joong                     | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Matta Mandeep                  | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Clark Catherine Nielsen        | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Lauren T Siy                   | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Mallapu Shravan K              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Stephanie Noyes                | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Valerie Thomas                 | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Rodriguez-Iglesias Realba      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Cieszynski Veronica Eileen     | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Mondelo Doreen Perez           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Montelone Kimberly Ann Np      | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Searfoss Linda A               | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Borden Jennifer Lynn           | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Sazon Alexandr                 | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Jeannie Ngygen                 | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Wilkinson Sarah Jane           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Snyder Ilona                   | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Nagle Henry Alexander          | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Colman David Lawrence          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Clark Kristina Marie           | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Nemith Lindsay Mumford         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Dumrese Danielle Lee           | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Tumuluri Srilaxmi              | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Ditursi Mary Kathleen Williams | Practitioner - Primary Care Provider (PCP) | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       | ▼     |        |  |
| Mary Patricia Shierly          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Blatz Sarah J Pa          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Dibble Colleen M          | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Maddalena Amy Elizabeth   | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Lawson Jessica L          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Krass Jessica A           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Samuel Jency Thomas       | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Morgan Lacey Elizabeth    | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Hennessy Elisa            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rizzuto Michael J         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Vachon Cary Ian           | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Rose Jennifer             | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Robinson Kristen          | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Van Amburgh Marilyn       | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Millea Kerry              | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Shrinkhla Agrawal         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rodriguez-Jaquez Carlos R | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bednarek Rebecca S        | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tatagari Jayasree         | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Farrell Claudia Sales     | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Raggs Hope G              | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Henson Jennifer T         | Practitioner - Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Russell Jennifer Brooke   | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Light Deborah I           | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chan York Sing            | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bourne Claudianus H       | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Quinn Barbara Hunter      | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Fraser Fayanne Maria      | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sazon Tatiana             | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Muhammad Rahshon          | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Betancourt Nicole         | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Steckman David            | Practitioner - Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Larsen Douglas P            | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Diamond Courtney Beth       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Newton Scott                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldsmith Christina Marie   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Martin Jill                 | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Mifsud Mindy                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Manjunath Kallanna Md       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Morgan Ayman Md             | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Reider Jacob Michael Md     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Friedrich Marcus Edmond     | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Denovio Bradley M Rpac      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Graney Sheela Md            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |
| Dykstra Todd Bryan Rpa      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Madala Padmaja Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Perez Leah A                | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dollard Michael Anthony     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Delamater Jeffrey T         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Schneider Nicole Marie      | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Glick Cheryl M              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Barraclough Nancy L Np      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ernst Cheryl Elaine         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Downey Kathleen Md          | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Navarette Kristen Alexandra | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chaudhary Shawn Ahmad       | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Larner Virginia Blake Rpa   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Spindler John B Rpa         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Matott Heather Melissa      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Lehine Guy Daniel Md Faap   | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Doro Kristienna Martin      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Santoro Deanna              | Practitioner - Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Tera N Hetrick-Platte Md    | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category                          | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Vitale Alex Nathaniel         | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Gomez-Di Cesare Caroline M Md | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| West-Brown Janet              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Potratz Meagan A              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Sheaffer Margaret A           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mack Kristin Lake             | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Merriman Joann                | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mckinney Sue Peterson Rpa     | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Ismail Mohammed Md            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Pride Boone Janice Md         | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Martorana Sebastian Vincent   | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Schumacher Thomas C Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Livolsi Laruen L              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Jain Rajinder Md              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mcgarry Karen A Rpa           | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Torre Jenny Ann               | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Gelfman Rachel Dawn           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Flynn Dedra Md                | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Caiazza Margaret              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Brasch Mary L Md              | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Petraccione Lisa F Rpa        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Sheehan Rebecca               | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Campbell Kathleen Kissane Rpa | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Dunne Christa Md              | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Stein Rhonda Danielle Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Kasarda Karen Marie Rpa       | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Woodruff Barbara A Rpa        | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Buhlinger Christine A Md      | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Nguyen Hung Dinh Md           | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Saunders Patricia V Md        | Practitioner - Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Karyn Marie Hughes            | Practitioner - Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |





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|--------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                  | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Brennan-Jordan Nancy           | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Ethier Gloria                  | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hildreth Deborah A Rpa         | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Parent Colleen E Md            | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Lemanski Paul Md               | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Vaidy Nishant Dr.              | Practitioner - Primary Care Provider (PCP)     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kumar Arbind Md                | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Trapp Joseph J                 | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Betit Alan                     | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Bossolini Marybeth M           | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Chauvin Rebecca L              | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Jacobs-Friedman Alon B         | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Clemente Kimberly              | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Devine Maria Kansas            | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Bellin Joyce Lea Pa            | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Pachucki Kevin Christopher Rpa | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mccarty Kaitlin Elizabeth      | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wales Danielle Patricia        | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Young Linda                    | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Michelena Karen X              | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ronan Alisha Lynn              | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Saluja Ravinder Kaur Md        | Practitioner - Primary Care Provider (PCP)     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Guice Stephanie M              | Practitioner - Primary Care Provider (PCP)     | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Sharma Chandra M Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Tan Alfonso Md                 | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Greenman Lawrence A Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Gottlieb Howard P Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Ford Jockular B Pc Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Shapshay Stanley M Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fox John M Dds                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lasky Charles W Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Boczko Stanley H Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Spooner Eric W Md             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shamoun Jack Elie Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Macdowell Richard Taylor Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Parnes Steven M Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hillinger Stephen Md Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Rivard Donald J Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Tassinari Robin Baker Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fisher Hugh A G Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Silvers Stewart A Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lepow Martha L Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Jolly George A Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Madeb Isaac Md                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Khoury Nidal Y Md             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Finger W Edward Jr Dpm        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shuster David Dpm             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kosinski Norbert Dpm          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Rosenberg Stuart A Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Steinberg Mitchell Lee Dpm Pc | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lee Joong Md                  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Trickey David L Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Quinn Brian O Malley Pc Md    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Naveh Marcia Spiegel Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Menzel Charles H Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Gay Royal Md                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Miller Nelson L Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |
| Grubs Adrian Md               | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Roberts Kevin Wilson Md       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Toussaint Jon T Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Edmond James A Md Pc          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Nepo Anne G Md                | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |



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| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Kercull Robert George Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mika Philip J Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Waldman John B Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mitchell Robert Alexander Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pinheiro Steven Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Krakower Leon A               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hena Muhammad A Pc Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Silver Steven M Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Clark David A Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kaplan Mitchel A Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Irwin Robert W Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gines Annie I Dpm             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Packard R Andrew Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pietrocola Donna M Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Shah Dhiraj M Md              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bakhru Usha H Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Minoff Richard Dds            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Valero Maximo B Jr Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Scherer Harvey D              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Lozman Jeffrey Md             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Purcell Peter F Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jacobs Fred I Dpm             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Herlihy Kevin J Md Pc         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bonura Frank Salvatore Md     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Del Giacco Desmond Rudolph Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Perl Lawrence Mark Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Greene Elliott Stephen Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fein Steven Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ells Peter Francis Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Silk Paul R Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Brodsky Stephen Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| John W Simon Md Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Henry Clarence Bruce Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ostrov Arthur H Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kolahifar Jafar Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Rauch Alan Edward Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Betzhold James John Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schoenfeld Barton Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shapiro Lee S Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hughes Richard A Jr Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Balter Richard R Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Paddock Bradley H Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Zimmerman Earl A Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Collens Richard Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Dinovis James Paul Dpm        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Beer Ruth Md                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Mchesney James D Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Yeaton Howard Lance Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rizzo Vito Joseph Dpm         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bruce Melody A Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Caldwell Samuel Smith Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Melbourne John Md             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Czajka John Md                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pozniakas James T Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Koeppen Arnulf Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Scotti Lorenzo Louis Dpm      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hendrick William Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Miller Richard G Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Friedman Simon Harold Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Francomano Thomas John Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lefkovits Andrew Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Baran Andrij Ostap Dimitry Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Garbo Lawrence E Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Weissbart Clyde H Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Wolfson Mitchell Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Horgan Michael Joseph Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Washington Ronald A Dpm     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bennett Edward V Jr Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Putnam David L Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Starkman Marjorie E Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Donovan Glenn J Dpm         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Vinciguerra Timothy J Pc Md | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Eames Frederick Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Kolber Bryan R Dpm          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bannon John David Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Otto James J Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Patterson Norman W Md       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Itenberg Alexander Md       | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Phelps Carlton Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Goodman Thomas L Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Groudine Scott Bradley Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sandler Steven Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lang Christine M Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Elacqua Mary S              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Atkins Carl D Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Parikh Shirish Jayant Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Gill Tarig N Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Zuravicky Igal Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bloomfield Naomi Terry Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Chen Ying-Jen Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Michalek Ann V Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tyler Ira M Md              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wharton Seth W Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Jaffe Joshua Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Digiovanni Louis A Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Czajka Ellen M Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Edge Walter E Ii Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Forrest George P Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Eisele George Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kahn Judith Eve              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Barnert David M Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Woodhouse Richard Phd        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mayer Dan Michael Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Semenoff David L Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bentrovato Donald A Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Puranik Arun Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Pearce Jennifer M Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Depan Harry J Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Saratoga Ear & Sinus Surgery | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Finn Daniel Joseph Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Phillips Roland Turner Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Posada Jose Gonzalez Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kuehler David H Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Carl Allen L Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Persaud Vyas Durga Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Blass Joel Mitchell Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Maben Wayne Charles Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pearlstein Gary E Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chalmers Paul Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hughes Peter M Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Krugley Richard A Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Maisel Barry Oscar Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wagle William Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Britton Lewis W Iii Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Paul Jeffrey Thomas Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Sacco Joseph D Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Malamood Howard Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Rosen Jonathan M Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Heasley Paul Edward Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Chang Benjamin B Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Tristram Debra A Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Whipple Richard Raybold Md | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Fuchs Marc D Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Boyar George Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Basile Dominick Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Delloio Joseph Anthony Dpm | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Smith Thomas Clinton Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kaslovsky Robert A Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Walsh Raymond Francis Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Dolph James L Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Elmendorf Sarah Louise Md  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Papandrea Louis M Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Fein Lawrence Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Scialabba Fred P Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Sanchez Javier Luis Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Cagino Anthony John Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Hughes Robert John Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Boxt Lawrence M Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Snyder Howard Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Mcerlean Mara Ann Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Subudhi Manoj Kumar Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Lamparello Peter X Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Laity Sandra Ann Dpm       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |   |
| Morere Donald R Jr Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Palat David S Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |



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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Griffith Richard L Iii Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Campito Mitchel A Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Karo Ronald Solomon Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lafleur Carolyn Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Roth Malcolm Z Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pinheiro Joaquim Manuel B Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Clinton Henry Louis Jr Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Harnick Robert Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Amyot Edmond Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hollowell Jean Gaye Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Socaris Sophia Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Scroggins Sandra Rae Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Atalay Hasan Nail Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kennedy Thomas M Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Furci Thomas James Dpm       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Schoen Fredric S Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gerber Allen Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fritz Howard Philip Jr Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Adsit Mark G Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Burdick Jeffrey J Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ritaccio Anthony Louis Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Constantino Jorge Lucas Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| De Vito Michael A Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cummings James J Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Alfred Richard H Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Valentine Elizabeth A Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Brooks Timothy Alan Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Koren David Joel Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jagoda Albert G Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldstein Elsa Teresa Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Yarinsky Steven Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |





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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Ying Rodney Lloyd Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Alderisio William George Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kapuscinska Barbara Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Macina Andrew Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Tobin Ellis H Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Desimone Cheryl Ann Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Robinson Lawrence W Jr Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Conti David J Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sarchino William J Dpm      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gudesblatt Mark Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ford Patricia Ann Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Menge Paul E Md             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sandison Michael RI Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Beer Paul Marius Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Philbin Edward F Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Marcus Dennis Carl Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Miller Stuart J Jr Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Esposito Russell J Do       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Roberts Maureen E Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fisher Marilyn Ann Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Coombs Kenneth E Dpm        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ross Jeffrey S Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hedderman Robert Joseph Md  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hosannah Hilton O li Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bernstein Michael Paul Md   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Uhl Richard L Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Meyer Dale R Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Storey James R Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Samelson Renee Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dudek Joseph J Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Alger-Mayer Sharon A Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Parmar Vinodrai Motilal Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bartfield Joel M Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dubin Andrew Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Amin Hiral Natwarlal Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Khullar Anil Kumar Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Saunders Richard A Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kandath David D Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Camp Rodney L Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Heysler Rebecca A Np       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Yarze Joseph C Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fisher William Thomas Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wilbourn Shelby L Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mathews John Francis Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Smith Vivienne E Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Frank Alex Harris Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Carino Aurora L Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Darling Ralph C Iii Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Argoff Charles E Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kuettel Thomas J Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Delago Augustin J Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Byrt William T Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Cavaliere Ludovico F R Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Willen Michael A Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Quinn David Edwin Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mitchell Barry W Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cole Peter Ramon Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schick Karen Wynne Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Jacobson Sig-Linda Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Galati James Edward Dds    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |
| Python John Patrick Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Andriakos Peter George Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Romer Richard Alan Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Weiss Robin                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ravitz Stephen B Dpm        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Brownell Donald N           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Leinung Matthew C Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bartholomew Catherine R Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kaufman Ronald P Jr Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Nijjar Gurkirpal S Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Bruce Victor G              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Militar Epifanio Iguidez Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Triner Wayne R Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Larosa Joseph M Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Starnes Hal Fletcher Jr Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mchugh Brian Anthony Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Glaser Lewis A Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Desai Nimesh Shashikant Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dweck Laurie Jo             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ayre Harvey Brandon Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Verra Mark A Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Daly Pamela Lynn Dpm        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Morley John N Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Luidens Mary K Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Higgins Donald S Jr Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Lackey Mary Michele         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Berkowitz Richard           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Knoeller Amy Eileen Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Esper Daniel William Md     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| King Charles Christopher Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sussman Daniel L Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Demarco Linda C Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Molho Eric Steven Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Yocono Mark A Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pike Denning Vanessa L Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Salama Meir Md                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Roberts Craig Edward Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Verdini John Patrick Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jones Richard Eaton Dpm       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schaffer Hal K E Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Card Harold George Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hart David Ernest Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gujral Maninder S Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Zobal-Ratner Jitka Ludmila    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Davison Edwin Allen Jr Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Patel Shailesh Rasiklal Md Pc | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Rios Angel Md                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mitchell I Weinstein Do Pc    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Porter Joanne C Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kesner Rubin Do               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kircher Mark Taylor Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pinto Gregory L Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Boenau Ioliene Beth Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hellman Lance I Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Melamed Daniel E Md Pc        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Vinh Phuong Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Gibbons Susan K Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Furst Branko Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hazen Gordon Rpac             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Yee Lily Fong Cho Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| O'Leary Anthony M Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kelty Robert Walter Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Greenberg Clifford A Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Chu Alan L Md                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |



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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Tranchese John               | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kredientser Daniel C Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Michailides-Townsend Sally M | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Simon Elisabeth              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Paty Philip S K              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Landy Robert Jay Dpm         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mastrianni David M Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Rangwala Sakina Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hoover Eric Md               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Stern Jeffrey H Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Alley R Maxwell Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sanders Alan M Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Millar Robert David Md       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Nichter Charles A Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Ortiz Gordon Michael Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sonn James Jin Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Kuhar Gordon N Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hospodar Paul Peter Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mason Appleton Adams Iii     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Spirig Andreas M Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Riddick Linda M Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Weaver Susan Adele Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Singh Tejinder P Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mccullough Andrew Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Bock Katja Elizabeth Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Samuels Sharon B Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Robertson Richard C          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chaudhry Sanjay Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jacobs Hugh Frederic Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mongiovi Russell J           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Senick Joyce M               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Oconnor William Walter Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lee Edward Choongho Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Syed Zainul-Abideen Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Dexter Martha Evelyn       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bock Devon E Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ravi Natarajan Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Cutler Amos B Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Astruc Manuel Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Deblock Heidi Frutchy Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kanaan Camille M Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Lucas Judith Anne Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Plotkin Richard Eric Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gupta Vinod Kumar Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jameson Gerardus L Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Holcomb Alvin D Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Siskin Gary P Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Contractor Salim G Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Ribons Lisa Ann Do         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Weidner Mark H Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wymer James P Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Cosgrove Ellen F Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Decunzo Louis Peter Jr Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kreienberg Paul Boyd Md    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Hoffert Eugene Joseph Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| James Ronald M             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Morawski John L Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Qualtere-Burcher Paul D Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Alagna Paul G Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Lechowicz Andrzej Jan Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kanwar Vikramjit S Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Desemone James Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Gupta Vinita Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mendola Antony J Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Diana Mary G Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |
| Kimble David Michael Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kufs William Michael Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Berry Wendy J                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Northrup Patricia Ann         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Cheney Robert Alan Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Mane Archana Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bernardini Gary Leo Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Millett Jeanne Marie          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kirkpatrick Douglas Peter     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Tai Muhammad Siddique Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Velvis Harmannus Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Herr Allen Michael Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Thibodeau Lorraine G Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rosati Carl                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Boguniewicz Anna B            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Carlson John A Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gillen Robert W Phd           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Jennings Timothy A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Nazeer Tipu                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Padi Madhu                    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Roldan Ernesto                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Shif Mark Md                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Chang Theodore Tuan Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kiehl Anita Md                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Celestin Jocelyn Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Scialdone Claude Joseph Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Birnbaum Eliot L              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Taccad-Reyes Sandra Carlos Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |



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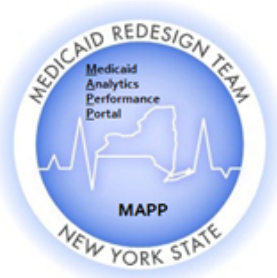
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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Conley Thomas Eugene Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Aronson Cynthia L Csw      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Greenspan James Scott Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Santella Donald Richard Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schneider James Michael Md | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Winseman Jeffrey Scott Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Napoli Michael A Dpm       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ares Carlos Alfredo Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Caracandas John E Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sai B Gandham Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kogan Barry Allan Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Shapiro Fred Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Damore Dorothy Taylor      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Copeland Terese Agnes Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Corbin Jeffrey S Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Beegle Scott H Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cohen Aaron Howard Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kabir Mohammad Humayun Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |
| Kondo Nicholas Ivan        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kamenir Steven A Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dearth Christine Cillis Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Capek Lucie Md Pllc        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goyer Richard Paul Jr Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Bovee Norman               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kolodziej Michael A Md     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Resta Regina Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Daley Lisa M Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| De Lair Paula Crehan       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Shaw Patricia Ahern        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Towner Robert A Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Beesley Bruce A Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |





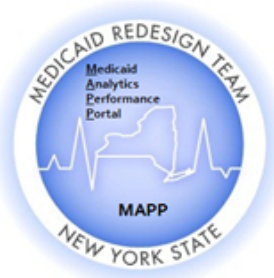
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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Czerwinski Maria H Md     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |
| O'Brien James Joseph Md   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dexter Scott C Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Block-Galarza Jessie A Md | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Bourke Diane A Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Folger Walter H Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Buhac John Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ogbuji Princewill O Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ehrenberg Eileen          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Benton Robert E Md        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Morris Robert Scott       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shah Parag S Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Oberg Gary David          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hajar Marilyn             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Litynski James            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Goldenberg Kelly A Cnm    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Kumar Raman Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Levine Carolyn Robbins    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ross Donald Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kulkarni Subash           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Inghilterra Karen         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| D Robbins Podiatry Pc     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Baker Kenneth J Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Galati Lisa T Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ostrowski Kathleen Lanka  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Khalak Rubia Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Zackon Ira L Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Wu Nini Choun-Yi Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| White Mark Donald Md      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Chandler Arthur C Iii Md  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Listman James A Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Meyer Daniel                 | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lau Kevin Md                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Marici Edward M Do           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Stam Katherine L Do          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Buhac Jean C                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dawkins Earl Anthony Rpa     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jacob Rana B Md              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Lahut Barbara K              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Qian Jiang Md                | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Flamer Harold E Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sheeley Donald               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Laguerre Julius J            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Bulford Lionel A Dds         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| De Filippo Jennifer L        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lundberg Lori A Dpm          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jorgensen Todd Robert Md     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Smith Peter Dpm              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shapiro Mikhail Do           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Jafri Mokarram H Jr Md       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Nichols Mary Kay             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Deporto Robert Do            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Reed-Esper Sarah Nicole      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Dunn Elizabeth Mary          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Doyle Melissa M Csw          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tietjen John Charles Jr      | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Venditti Ferdinand Joseph Jr | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Morris Adrian Anthony Md     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Palmieri Philip J Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chase Michael P Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Khan Tabassum Y Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wurl Derrick R Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects     |  |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Nardacci Elizabeth Anne       | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Tier Beatrice Louise          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ng Bernard                    | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Peters Robert Lcsw            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Soscia Gina Lcsw              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Toole Nancy E Lcsw            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Brasch Robert C Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Phelan John Thomas Ii         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bell Joseph William           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Cameron Jefrey Stuart Pa      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Mcpadden Marion C Cnm         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lenihan Michael William Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Murnane Matthew J Md          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Schweitzer Frances Robyn Phd  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Funk Deborah Md               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Falk Arthur N Md              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gleason Mary Kathryn          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Klim Kathleen                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Wang Qiong Md                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Smith-Booth Brenda Karen      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Boulos Maria Theresa Bajas Md | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Munshi Upender Md             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Comber Paul Gerald Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Slatch Carolyn Jean Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Roddy Sean Peter Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sternbach Yaron Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bown Melissa Ann              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Das Shankar Md                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Macdermott Richard Pratt Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Duthaler Todd Douglass Md     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dirisio Darryl John Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Robinson M Brigit Np        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ceballos Jeanne Forziat     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Flood Christopher Daniel Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Valliere Julie              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rodriguez-Tellez Jamie      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Morelli Amy M Rpa           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ehlers Mary Ellen Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Crnkovic Anica Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Prime Donna Rpa             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Youngelman Debbie F Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Norton Mary Alice           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mitchell Nancy Lynn         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Hansel Lori Csw             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Onghai Benson Go Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Cox Lorraine Renee          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Laddis Theodoros Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Clark Donald Robert Pt      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Poli Kim Ann Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fear Philip J Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Romero Jenny Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gray Robin Mary             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mcconnell Theresa Marie     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Papaleo Rafael Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Richter Seth Joseph Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mckenna Dennis Patrick Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pyle Bert William Iii Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pasha Muhammad Asghar Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hinerman Rachel Sue Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Devejian Neil S Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dawodu Segun Toyin          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sama Jalin Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



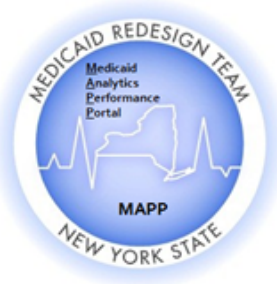
**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects    |  |       |         |       |         |       |       |        |       |         |       |        |
|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Thompson Dan Ralph Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Ozsvath Kathleen Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pradhan Elizabeth            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Goslin Robert H Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ehlers Melissa Anne Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldman Rosemary Brezbrodica | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Andrejuk Tomasz Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Saqib Najmus Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Santoro Ian Heberd Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Silver George E Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Brodsky Laura F              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Swensen Keith                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Curtin William Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Geci-Black Michael           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Doyle Todd Harrison Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mouzakes Jason Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bauer William M Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mehta Manish Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Asher Shellie Lynn Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wilkins Lance Julius Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hutton Jennifer Dpm          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Mian Badar Munir Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Dailey Michael Winter Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Di Preta John A Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Spektor Boris Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Jorgensen Shawn P Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Espey Kathleen Ann           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Garcia Juan Carlos Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Raj Kapoor                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dempsey Stephen J Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mandato Kenneth Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |



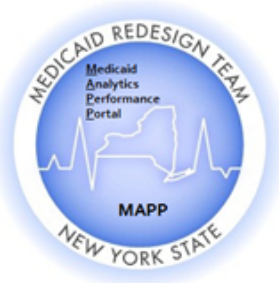
# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects        |  |       |         |       |         |       |       |        |       |         |       |        |
|----------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                    | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Hopkins Patricia M Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Torosoff Mikhail T Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldberg Barry Stuart Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lingat Marie Cheryle P Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| May Doreen T Rpa                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Emmons George Dpm                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Marsh Patricia L Rpa             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Basavaraju Nerlige G             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Achar Naveen Md                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tobolsky Shimon Rpa              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fabre Lynn D                     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Wohlfahrt Kristine Marie         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Albright Lauren Ann              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dittes Paul                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pauze Denis Robert               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wood Colleen T Np                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Whyte Mary C Md                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Giramonti Karla Michelle         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Catania Lucien D Md              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Nikiforov Konstantin Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Field William Edward Ii Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Artino Lisa M                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Dorflinger Joseph Lcsw           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Murray Brian P                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Barba Anne Lauren Phd            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sparano Antonio Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Prasad Manju Md                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Siebeneck Aaron J Dpm            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Mcgovern Christine Elizabeth Rpa | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hassett Stephen G Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pani Saroj Md                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



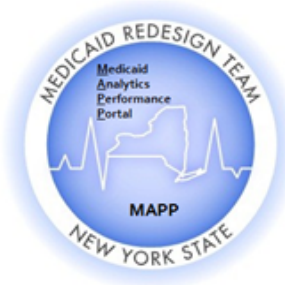
**New York State Department Of Health  
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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Bayoumy Sayed Mahmoud Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jones Stephen Paul        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mishra Rina Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rana Nirmala Psy.D        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Falk Naomi S Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kleyman Emily Phd         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Suna Carla Joyce          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hirt Deborah              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Allen Christine           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Boulos Alan Samuel Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gattuso Christi           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bagchi Kaushik Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Chen Wei Yu Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Offord Stephen Robert Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Kaplan Eugene Daniel Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gara Maureen              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |
| Abdelhamid Ayman          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Adamczak Julita Rae       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Chank Shelly M            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Dahl Jeanne A             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Flax Harold               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Griffin Margaret Anne     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Marsh Catherine Louise    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Matties Regina K          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Newsome Donna             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ranges Mary E             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rendich Kathleen          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Case Christopher John Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hollands Celeste Marie Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Siebeneck Hillary         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kutzer William M          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Pelesz Jennifer           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Diaz-Parker Carl E        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Rodrigue Raymond A Rpa    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Caulfield Cora Lynn       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shaver Jeannelle M        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wiest Daniel R Rpa        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shafer Carolyn H          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Claus Jeffrey K           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schafer William R         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dluge-Aungst Dawn B Rpa   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Ralph Walter M Jr Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Belova Natalya Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldin-Denio Margaret     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dedona Andrea M           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| D'Accurzio Michael A Rpa  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schongar Marie Antoinette | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Utter Denise Maria        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Maxwell Steven J Do       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Samson Susan Marie        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gill Zaheer Ashraf Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Detommasi Allison Rose Md | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lu Ping Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Ford David L Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Paul Arlette Mary         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Limes Britton J Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Adams Darius John Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pericak Arlene            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sani Farzad Dds           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Valerian Brian Thomas Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Englander Meridith J Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Liebers Edward Martin Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |





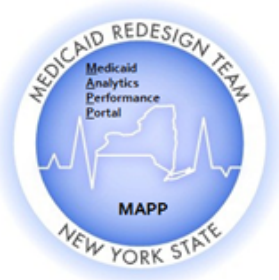
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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Byrne William Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Raja Asim Nazir Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bielawa Robert A Rpa      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Collea Rufus Patrick Md   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Baker Judith A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chao Jerome Donald Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dodd Jack Edward Jr       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fredenberg Jason R        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Jones David M             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Naumowicz Edward T        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Russo Thomas              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Young Pamela Y Rpa        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Daoui Rachid              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Burke Jessica Narr Phd    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Long Heather Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Demaree Julie E Rpa       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Spear Alison Heather Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Brady Ann Theresa         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Braga Eileen              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gregg Michael             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Iler Christina            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Keating Patricia Lcsw     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kellner Thomas            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Packard Regina            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kennedy Tracy             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bonanno Joseph Md         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Oechsner Helena Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Laz Desiree F             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Dawson Schuyler C         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Petronis Karen            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lobo Melvyn Albert Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |



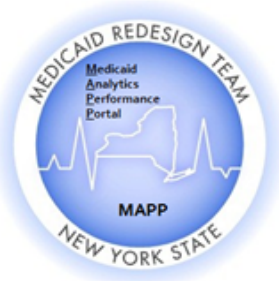
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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Brown Alice D               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rieker Judy J               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Winderl Erin M              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Graham Jill M               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Nelligan John               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bredwood Jacqueline E       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Churchill Laura Hutchins    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Miller Beatrice E           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Miller John                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kearney Andrew S Rpa        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Amin Hetal Thakor Do        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Simor Ginger Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wood Bret James Do          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dejesus Maria Arsy Dulay Md | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mittal Peeyush Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Schneider Jennifer L Rpa    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dicaprio Matthew R Md       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Han Jihuk                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Barrack Bruce               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Potenciano Angelo           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Li Eric                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Dicerbo Nancy               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tedesco Karen Lynn Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       | ✓      |
| Gold Daniel C Rpa           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hettrich Amy L Rpa          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hunter Laureen A Rpa        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gold Eric W Rpa             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Deserre Steven Francis Cnm  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Taggert John B Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mok Ki Tae Md               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Phelan Daniel T Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |



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|-----------------------------|---|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                                     | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Torres Camilo G Md          | Practitioner - Non-Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Stemper Erin Clarke         | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |
| Cytryn Jacalyn J Mdd        | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |
| Blackington Colette C       | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Celmins Dzintra Freimane Md | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mookherjee Sulagna Md       | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gokey Ellen L               | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bughrara Nibras             | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Olds Tia D Md               | Practitioner - Non-Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| <b>Biglane Rayma</b>        | <b>Practitioner - Non-Primary Care Provider (PCP)</b> |       |         |       |         |       |       |        |       |         |       |        |
| Soab Medical Pc             | Practitioner - Non-Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Fellegi Aniko Md            | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nigam Sujatha A Md          | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Defrancisco John Md         | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mcfarlane Jessica           | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |
| Deteso Damon Md             | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Byrnes Christine M          | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| <b>Drzymalski Jolanta</b>   | <b>Practitioner - Non-Primary Care Provider (PCP)</b> | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Kinlan Bernard P            | Practitioner - Non-Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Nigam Ankesh Md             | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Pan Phillip Md              | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Zamer Joshua D Md           | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Comar F Dayle Md            | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Moss Vance J Md             | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |
| Pilpel Sylvia E Md          | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| German John William Md      | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Marks Elaine Marie Pa       | Practitioner - Non-Primary Care Provider (PCP)        |       |         |       |         |       |       |        |       |         |       |        |
| Lloyd Adam Taylor           | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dodd Debra L                | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Rosas Kevin E Md            | Practitioner - Non-Primary Care Provider (PCP)        | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Thompson Shannon E          | Practitioner - Non-Primary Care Provider (PCP)        | ▼     |         |       |         |       |       |        |       |         |       |        |



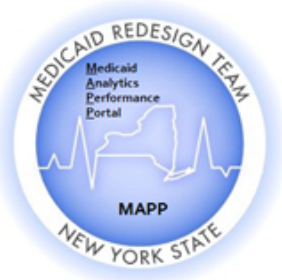
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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| King-Hall Pamela             | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Reynolds Frederick D         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Shir Irene                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Friedman Cynthia Susan       | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Seedhom Ashraf E Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Connors William Patrick      | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Keefe Joan Marie             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Wladis Edward Joel Md        | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Schlossberg Howard Robert Md | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Herzog John Christopher      | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| O'Meara-Zimmer Kimberly J Np | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Palmer Michelle N            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| De Elise J B Md              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Domingo David Bucuo          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Wang Robert Shih-Ning Md     | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Silverstein Mesidor S Md     | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Blackburn Chame Curtis Md    | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Dadian Nishan                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| De Arup Md                   | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Comley Sood Shannon Md       | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Khera Kanwarjit S Md         | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Afsarkeshmiri Armin Md       | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Bernad Jason Edward Md       | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Kim Sun Jin Md               | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Nappi Anthony Gerald Md      | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Mcbiles Mike Md              | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Chaudry Shahina K Lcsw       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Postal Eric S Md             | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Filanova Vincent Dds         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Zieker Christopher Robert Md | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Saunders Jessica Ann Md      | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |



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|-------------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                       | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Cunningham Cathryn Courtney         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Weaver Jacqueline Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kayastha Sanjiv Md                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tarte Michelle L Rpa                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Chowdhery Naseer Amd                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| El-Mohtar Kody Khallad Assad Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stain Steven Md                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Myint Win Md                        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Powers Marianne Np                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lynch Timothy Michael Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bailey Kelly Ann Np                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jindal Rahul Mahendra Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schaefer Bianca                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Iqbal Anjum Md                      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dundon Renee Rpa                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Coombes Sereena Carol Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Coombes John Michael Christopher Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gruenthal Michael Md                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stanley Valerie Ann Np              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Tan Henry T Md                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shaffer David Richard Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Capello Seth Alexander              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kaw Pamela Md                       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Hellwitz Frederic Jon Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Sood Vinay Md                       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Colaneri Jean                       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tschinkel Marybeth                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mcdonald Katherine G                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stephens Christopher S Rpa          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schuster Michael Edward             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Ferrillo Martin                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|-----------------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Provider Name                     | Provider Category                                     | 2.a.i                    | 2.a.iii                  | 2.a.v                    | 2.b.iii                  | 2.d.i                    | 3.a.i                    | 3.a.ii                   | 3.b.i                    | 3.d.iii                  | 4.b.i                    | 4.b.ii                   |
| Phelan Donna K Md                 | Practitioner - Non-Primary Care Provider (PCP)        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Mcginn Arthur</b>              | <b>Practitioner - Non-Primary Care Provider (PCP)</b> | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Vandepol-Rimash Maria             | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mcmaster Aimee                    | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Graham Margaret                   | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Lawlor Pamela J</b>            | <b>Practitioner - Non-Primary Care Provider (PCP)</b> | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Pliscofsky Gail</b>            | <b>Practitioner - Non-Primary Care Provider (PCP)</b> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |                          | <input type="checkbox"/> |                          |
| Amoroso Jennifer Lcsw             | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Massonne Mary Lynn                | Practitioner - Non-Primary Care Provider (PCP)        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Mann Stephanie Elise              | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Katz Benjamin S Md                | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Cadigan Beth Md                   | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lancaster Karen                   | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Rossetti David                    | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| Clark Sara N Md                   | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Yamada Brian S                    | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Beyer Todd David Md               | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gorczynski Christopher Md         | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fleming Cathy                     | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Lacy Peter Charles                | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Trehan Manoj K Md                 | Practitioner - Non-Primary Care Provider (PCP)        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Yamada Jennifer Susan Md          | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Miller Kristin M Rpa              | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Vengrin Jana Gale Np              | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Bloss Christopher A Md            | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Earshen Amy                       | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          | <input type="checkbox"/> |                          |                          |                          |                          |                          |
| Woolley Wendy Lee Do              | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Gaynor Patricia Np                | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Hinds Marcel Eldon Md</b>      | <b>Practitioner - Non-Primary Care Provider (PCP)</b> | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Goetz David H Md                  | Practitioner - Non-Primary Care Provider (PCP)        | <input type="checkbox"/> |                          |                          |                          |                          | <input type="checkbox"/> |                          |                          |                          |                          |                          |
| <b>Collins Jeanette Jennie Np</b> | <b>Practitioner - Non-Primary Care Provider (PCP)</b> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |



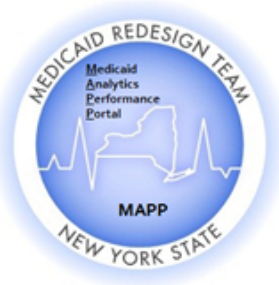
**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects          |  |       |         |       |         |       |       |        |       |         |       |        |
|------------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                      | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Krishnappa Kachigere Siddegowda Md | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Shahata Hani L Md                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Thomas James Md                    | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Varone Ricky A Rpa                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Fiet Marcy Adirie                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Saltzberg Stephanie Sharyn Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hayes Joseph Robert Md             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Remson Karen M Np                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Aboelsaad Farag Wanees Farag Md    | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Fiore Alicia J Rpa                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Nelson Dina S Md                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mosher Seana L Rpa                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Angelotti Marietta Md              | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Huber-Villano Patricia             | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Ciccateri Ruth A                   | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       | ☑       | ☑     | ☑     |        |       |         | ☑     |        |
| Escobar Diego Md                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Evans Sarah M Rpa                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Khalil Hani L                      | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Peritz Robin                       | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Blossy Christine                   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bove Liza                          | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Brown Ashley                       | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Gusten William M Md                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Eldredge Amy Beth                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Lisella Jordan Mills Md            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Strauss David Noah Md              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Payne Melinda Lee Md               | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Rohan Darren I Md                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Qualia Cary Michael Md             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Kennedy Sean Michael Md            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Calistri Christine Jane Np         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |



**New York State Department Of Health  
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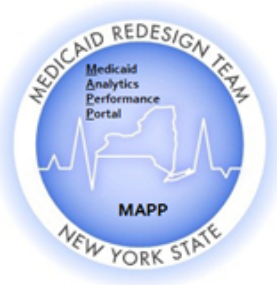
**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects   |  |       |         |       |         |       |       |        |       |         |       |        |   |
|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Franklin Peter Augustus Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Pauze Daniel K Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kuo Ramsay                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Varghese Noel Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |   |
| Hanakova Marcela Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Yamamoto Junichi Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Fitzpatrick Michael Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Dickson Matthew J Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Olszowka Joseph V Dds       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Napier Mark B Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Canete Jonathan J Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Whitney Valerie C Rpa       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Laufer Andras Laszlo Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Chopra Rupal Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Tohtz Damon Alaric          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Reutzel Laura               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kavanaugh-Black Andrew J Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Allison Stefanie L Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Amsden Tracy Rpa            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Teppo Deborah Lynn Lcsw     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      | ✓ |
| Hubbell Jr Robert           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Tessler Patric              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Hazimeh Yusef Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Gellert Jane Carla Phd      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Greer Alyssa Rpa            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Tirgari Franck Taghi        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Goodemote Melissa           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Larow Catherine Mary        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Iannuccillo Anthony         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Larsen Karen                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Jennifer White              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |





# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

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| Participating in Projects  |  |       |         |       |         |       |       |        |       |         |       |        |  |
|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Rasouly Yama               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pappas Mike                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Uzzilia Jeffrey            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Mavashev Mikhail           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Smith Raymond              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Kiley Kevin                | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Zanaros George Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Sullenberger Lance Eugene  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Olszowka Angelique         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schatz Barbara             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Swaminathan Jyoti          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Bonville Daniel James Do   | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Laplante Steven P          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Whiteside Beth             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Abel-Bogner Lisa           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Perkins Pamela             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Mcbride Janet              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Weil Dympna Lynch          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| David Jason Ellenbogen Dpm | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Dolinsky Christophe        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Northrop Jennifer          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Whiteside Michael          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Monaco Barbara             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Torregrossa Martha         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Binetti Brian Richard Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| William H Montgomery Jr    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shamoun Karen Md           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Tanya Nicole Needham       | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Lawrence James Patrick     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Lagrove Brent Foster       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Akujuo Adanna Chinaka Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Mohammad Etlajjar          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Schaetzi Christine         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Shatynski Todd             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Tariq Sayed                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Wickman Douglas            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Karen M Powers             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kathryn Hogan              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Malone William J Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Condry James Dearien Jr Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kelling Timothy Scott Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Stutz Helen Rita Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Santos Roberto             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Camillo Reginald Alivia Md | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Dowling Thomas C           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Oommen Shobin Md           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Astorga Rakel Maria        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Farah Rebeka Rpa           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jeffrey Raouf Ridha        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Peter Elliott Fisk         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Carruthers Jay             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jarvinen Kirsi M Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Ortiz Jorge A Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Birdsey Karen Diane        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Standefer James            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Samenfeld-Specht James     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Amory Colum                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Scelia Lauren              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Grendly Sharon             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Simone Jean                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Higgins Erin               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Sasvary Mark               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Phung Quentin Md           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| D'Arcy Allison T Rpa       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Reimenschneider Justin     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Ampuero Juan               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Gregory Jenann J           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kevin Jones                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Nabozny Geraldine M        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kayajian Daniel Michael    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hall Duane Seymour         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Pettigrew-Duffield Pamela  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Wheeler Julie Ann Np       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fantauzzi John Patrick Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| George D Waterman Jr       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Heather L Juby             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Moffatt Jean               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Riccio Alexandra           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       | ✓       | ✓     | ✓     |        |       |         | ✓     |        |  |
| Oretsky Dawn L             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Scott Sara Elizabeth Pa    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Schwartz M Miles           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Adamo Matthew Armand Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gerdeman Andrew Charles    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Nguyen Le                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mulligan Michael Thomas    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Cirilla Dennis Jacob Ii Do | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ferrara Justin Michael     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Davidoff Sam Do            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Miranda L Dunham Fnpc      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Vaisman Vadim              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Penc Stanley F Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Daniela Iulia Sima         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Taylor Matthew Arnfin      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                       | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Brady Christina Marie               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Feygin Ruslan                       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dorfman Annette                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Spooner Elizabeth M Dunn            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Casivant Melissa M                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Visagie Anina Isabella              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ferrando-Dehtiar Natalia Victorovna | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Caesar Mimieux Vanetta              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dalfino John Charles                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fitz Bronwyn                        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Krishnakumar Dundappa Hongalgi Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Southworth Krista Rpa               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Evans Christopher Johns             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Blinkhorn Richard John Jr           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fabian Thomas                       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Soryal George Fayk Melad            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bennett Joseph                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kane Tabitha                        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tryon Crystal M                     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mongan John Patrick                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sandra L Foster                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Samuels Barbara Nan                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Barcomb Timothy F                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| John Delmonte Jr                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Seale-Simpson Marjorie Elizabeth    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Adger-Antonikowski Angela           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hogan Eileen Fox                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Frawley Bridget Kathleen            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| White Bruce David                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Singh Ashwinder K Np                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Dennis J Basila                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



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| Participating in Projects  |  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|----------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Provider Name              | Provider Category                              | 2.a.i                    | 2.a.iii                  | 2.a.v                    | 2.b.iii                  | 2.d.i                    | 3.a.i                    | 3.a.ii                   | 3.b.i                    | 3.d.iii                  | 4.b.i                    | 4.b.ii                   |
| Bull Stephanie J           | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Lyubarova Radmila          | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gsell Jennifer Lee         | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Johnson Sheena Marie       | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Stevens Laura Kathryn Rpa  | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Leo Carol                  | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Brunelle Trudy             | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| Zacher Megan Marie         | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Ceccucci Janice Lynn       | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Knight William             | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Fogg Jo                    | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Demadaler Elyse            | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Bolnick Jay                | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Abel David                 | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Zen Qin                    | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Colon Michael              | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Hnath Jeffrey              | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Windisch-Shayer Jacqueline | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Greene Jill                | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| Iyer Shridhar              | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Cohen Jason                | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Carsello Jeffrey           | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Turinsky Andrew            | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| O Malley Rebecca Leigh     | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Robinson Stacy P           | Practitioner - Non-Primary Care Provider (PCP) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Allmendinger Nikki         | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Greenblatt Daniel Edward   | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gainor Jonathan P Md       | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Aron Uthayashankar         | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Foulke Llewellyn           | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> | <input type="checkbox"/> |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Saeed Syed                 | Practitioner - Non-Primary Care Provider (PCP) | <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |



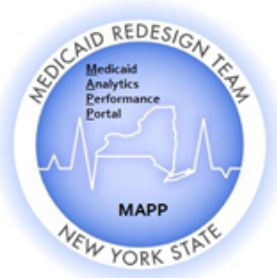
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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Gennari Lindsay           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Ramesh Subedi             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Datt Chandradai           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Conner Sean Richard       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Loytra Oleksiy            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Rau Stefan Thomas         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Nietsch Hubertus Heinrich | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Scardillo Judith          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Hamilton Jennifer         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Zhu Xinjun                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Hanspal Era               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Pregont Scott Michael     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Mcdermott Nancy Ellen     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Evans Mary Teresa         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Dufort Elizabeth Mariann  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Brakman Patricia          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Chaudhary Ayesha Muriam   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kim Richard Lee           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Leduc Laura Howard        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Waxman Michael Jay        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Pieterse Portia Lucille   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Balkoski Victoria         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kulzer Daniel             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Bakhos Charles            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Mckee Mary Ann            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Thirkannad Indra          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Ramirez-Zamora Adolfo     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kuchis Michelle Katherine | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Stephen Larson            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Steinberg Barry           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Porter Allison Kay        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |



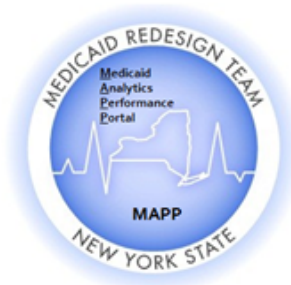
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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Amanda Jill Clemence       | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Shin Catherine Hekyung     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Baranov Dmitri             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Loeber Russell             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Blaisdell Lauren Mackenzie | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Rostocki Bernice Ann       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Jones Chandra              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Alshaer Khalil             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Alexander Volfson          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Judson Marc A              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Spencer Taylor             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gresseau Shirley Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Kafilludi Ronny            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ramos Glenn Patrick        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Roberts Jared T            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Pacheco Joshua Michael     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Murtagh Colleen            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Maccio Brenda              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Serri Lisa                 | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Cassese Mary               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Goel Nirmmit               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Eldakar-Hein Shaden        | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Li Chunhua                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Brake Sami                 | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Oyiborhoro John Mokoro A   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Doelken Peter              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Singh Gurpreet             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Thevenin Claudwardy        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Durphy Jennifer            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Keating Lawrence           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Khan Manji Samira          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |



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| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Elnagar Khalid Abdelsalam    | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Alapati Sailaja              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dolen Michael                | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Cousins Joseph               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Evangelist Makenzi C Md      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Perwaiz Muhammad Khurram     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rhymaun Rachel E             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tenuta Joachim J Md          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Agag Richard Louis           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Tilney Peter                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Varlamov Anna                | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bass Anna                    | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Madigan Heather              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Patel Ashit                  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Itty Any                     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Frisch Adam Md               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Vena Stephen Albert          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hutchins Elizabeth Ann       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Detschelt Elizabeth L        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hayes Jennifer               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Divvela Satyanarayana Murthy | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Zahir Mehjabin               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Eromo Ersno Md               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Joseph Josmi                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Przybyla Adrian M            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Palmer Bradford A            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mohsin Intikhab              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Durie Nicole                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ingoglia Michael             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mueller Benjamin             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Phoenix Jennifer             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |





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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Kachurek David P           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Smith Derek W              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Brula Abdul Qadir          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Renaud Elizabeth           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Cutry Anthony              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Thompson-Badamosi Tanya L  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kaiser Laura Marie         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Starkman David             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Afroze Farzana             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Choudry Ahmad Bilal        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Pilitsis Julie Georgia     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Janssen Daniel James       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Martin Andrew              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Berger Niel Phd            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Jared Scott Jerome         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Brutus Valerie             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rillo Bella Dizon          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rai Rohit Kumar            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Fields Jennifer L          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Wintle Catherine Ann       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bailey Laura M             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Murawski Julie Lynn        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Williams Marguerite H      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kee Elaine F               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Libruk Tara Kristine       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Burns Lisa Marie           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Dunkerley Christopher J    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rifenberick Mary Ann Carol | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Au Angela K Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Medina Christopher         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Malone Patricia            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Balog Amy                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Geraghty Nicole Kristine  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Theresa Carpenter         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Nickels-Nelson Gina Marie | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mastrangelo John Armand   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pastena Gaetano Thomas    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mccarthy Brigid           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wells Catherine           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pugh John A               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kenning Tyler James       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Iyer Aparna               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Asif Arif                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kim Grace Y               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hansen Philip             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Phillips Victoria J       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Caracci James Robert      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chismark Anthony David    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Huss Sara Abigail         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Valley Katie Jayne        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Carsello Carrie           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tirabassi Michael V       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jones Rushton Michael     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Medarov Boris I           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Oakes Jennifer Audi       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Marchland Maurice E       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Chang Kit Laura Annelise  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Weaver Jeffrey            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Steindler Jason Harrison  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rasouly Mai Mona          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Murphy Sean M             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Black Trevor              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |



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|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Monroe Richard                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sharma Vibhavas               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Baxter Lori                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Maldonado Elga                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Garbarino Kathleen Marie      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Memmelar Angela R             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Mamot Baker Margaret          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ganey Michael Edward          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Halsdorf Courtney Soon Hee    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bunch Marjorie                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hamilton Christophe           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Koumanis Dimitri              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pokharel Sunil                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lopez Stephen                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Devkota Aaushma               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Reed Thomas                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mazo Francisco                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lukowitsky Mark               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Durham-Fowler Jennifer A      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mills Jessica L A             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sidhu Mandeep Singh           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bowen Katherine               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lazar Beverly                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Shah Melissa                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Tauber Kate                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stein Julie Ann               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pinheiro-Neto Carlos Diogenes | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gozman Alexander              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Engelhart Heather             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shapiro Lois A                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Melius Jonathan Robert        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Lipscomb Deanna M          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Smith Jennifer             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Coffman Megan              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Monaco-Brown Meredith      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Siegel Eric                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| O'Connell Sherie M         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Ginebra Claudio            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Connell Ashley Elizabeth   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Raitses Pauline            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shepard Leigh A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Krull Joanna R             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kennedy Jeffrey            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Guidarelli Heather Mary    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Patel Anar J               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hassan Jones Lynn B        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Eager Jeremy Morgan        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Walsh Anne Catherine       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lee Jamison                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hedden Jeffrey Louis       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Duncan Luke Joseph         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ellwood Rebecca            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Paige John Alexander       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hausman Julia H            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sukumaran Sunitha          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mimlitsch Ellisa           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Smith Rachel E             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Davila Theresa Ann         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Solga Matthias             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Heinlein Thomas Edward     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stefanova-Stephens Nadejda | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Iskhakov Edward            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



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| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Huston Jason Michael      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Vukovic Joseph Thomas     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Zhao Ling                 | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Galay Igor                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kehr Andrew David         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mazur Jordan Thomas       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Derouin Laura C           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Jhandier Muhammad Nauman  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rowlands John             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Coiteux Yvonne C          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Oluwole Olakunle Kayode   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mathew Roy                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Musuku Sridhar            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chopra Amit               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Morgan Matthew            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Arunakul Nathapong        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ward Kathleen A           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bahrassa Farhad           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hand Drinnon              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Arellano Jason            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Shawa Hassan              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pluto Luke A              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Niebuhr Jean-Marie        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bhullar Ravneet           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cunningham Lynn A         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Monsour Sophia            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Silverman Eric Ross       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Frey Michelle West        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Flaherty Michael Andrew   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Alpaugh Craig Alan        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kang Kibbum               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Shaw Colleen Margaret      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Galusha Jill Brisbin       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Frasier Kasandra C         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Petith-Paulsen Joan M      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rezak Kristen              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ettekal Yashar             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kiff Jane                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Abraham Christa Rose       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tillack Lindsey            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pahwa Suneet Singh         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Conklin Jeremy             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Winston Brion              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Crowe Karen Gisotti        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Hosaka Mia                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lu Hsien-Yi                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Schwab Marjorie            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sorel Bertrand             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Osika Swank Michele Mary   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bellomo Courtney M         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Byrne Christopher          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kimball Randall Mark       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kambam Madhavi Latha Reddy | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kathleen Puffer            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rhim Changsoo              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Patil Pushpa Shyam         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rooney Danielle Marie      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Levine Matthew D Rpa       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Adepoju Grace Adeola       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Shur Natasha               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bryan Richard              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mueller Kelly              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |

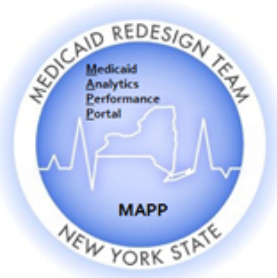


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| Participating in Projects         |  |       |         |       |         |       |       |        |       |         |       |        |  |
|-----------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                     | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Parikh Reena                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gebremichael Amine Fessemagiorgis | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Tafen Wandji Marcel               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Adetayo Oluwaseun                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Donnarumma Robert                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Byrnes Crystal                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fidelman Leila H                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Granados Elizabeth                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| FrancaVilla Frank Nicholas        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Heintz Hollis A                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Slocum Christine N                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Garcia Medina Lymanis             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sarah G Fox Dds                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Buchanan Titiana Alexeevna        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Harter Jillian                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Liss Allison                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Faliszek James                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Celestine Erica                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |
| Petruzzo Maria C                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Amanda Hordos                     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Kestler Margaret                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Linn Eileen                       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Johnson Matthew C                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hall Erin Christina               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Debergh Marc Taylor               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Horvath David                     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Clark Patricia L                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Kane Sujata R                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mabry Myra A                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Higgins Amy R                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Ash James Edward                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |



New York State Department Of Health  
 Delivery System Reform Incentive Payment Project

DSRIP Implementation Plan Project

Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects |  |       |         |       |         |       |       |        |       |         |       |        |
|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Walter Chelsea C          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Harrica Rebecca Ann       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Moore Robert J            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Newman Lisa C             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Heran Meghan E            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schweikarth Lindsay A     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Talbot Jean F             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lalonde Jordan L          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Desanctis Sara E          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Reeves Sherry L           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Singh Jitendra            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bhatia Gulbir             | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Cooper Kenneth R          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mccartney Jeffrey Robert  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Christian Patricia S      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Collins Kevin P           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Olexa Laurel Wilber       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Smith Janeen A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Juyia Rushad Farhad       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Occhiogrosso Marie Anne   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Cohen Donna Marie         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gray Wendy Jo             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hebert Debra A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Peluso Peter              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Graziano Pauline D        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Larson Una B              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tse Sara Elizabeth        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lange Josef F             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dick Ronald Larrabee      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Santiago Nichole          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Oetomo Audrey             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |





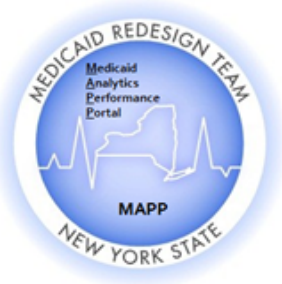
# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects  |  |       |         |       |         |       |       |        |       |         |       |        |  |
|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Adjara Jennifer Ekwutosi   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Monahan Meredyth Leigh     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Geary Sean Patrick         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Haverly Colleen Anne       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Coloprisko Sara Ann        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Almony Danielle P          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Ciccarelli Blair           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Yates Patricia K           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Qandah Juleen Jandali      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Lewis Heather              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Malone Chemin Marie        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Gardner Jerry L            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Chu Michael H              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Wilson Allison Marie       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       | ✓       | ✓     | ✓     |        |       |         | ✓     |        |  |
| Kogan Yelena Aleksandrovna | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Davis Alecia A Np          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Kent Kenneth               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Deeb Erin M                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Masters Cindy N            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Larrabee Erin V            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Idelchik Gary M            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ellen Joseph Harry Iii     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Taylor Ben Frazier         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Devlin Jean Smith          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Cooley Michael Robert      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Dagostino Monica Dawn      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Globokar Joseph            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Burke Kelly Laurice        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Tuczynski Kathryn E        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Daraban Nicoleta Md        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tan Josenia Narcisa Mailed | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Travis Robert Whitney     | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bromley Nicole            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mansen Roberta            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Samson Brianna P          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |
| Chen Vivian Min-Lan       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Maroney Justin V          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mermelstein Peter L       | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Redding Jack Eugene       | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Yager Jennifer M          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Crosier Amanda            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Cooley Christine          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Haber Marc                | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Keenan Christophe         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chow Yvonne               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Liu Baogang               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Al Kawass Anas            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Paiva Priscilla           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| White Noah                | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Noonan Jessica            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Carpenter Courtney        | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Autin Robert              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Plakas Constantin         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Narayan Ananth            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Vatsky Seth               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Suchowiecki Mark J        | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Suchowiecki Kristin M     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Lipat Portia              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Mcshane Danine A          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Daniels Randi L           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Dillon Jessica L          | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Slavin Laura N            | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |



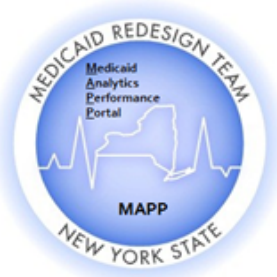
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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Post David Robert            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Medin Karen Louise           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bernardi Shaina              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Steiner Anna                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lee Minsun                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pires Ervoes John            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Luthra Munish                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gordon-Stacey Carrie         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Crosby Erin Claire           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tessitore Donald Francis Iii | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Joseph Jalaja                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rathert Nicholas             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gold Kristin                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Jaitovich Adolfo             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Paulsen Rana                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Joseph-Belfort Alison        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dakakni Tarek                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Malek Sohail                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Tadros Michael               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Boyd-Smith Molly             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Deroo Andrew                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wiczulis Alicia              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Zysik Meghan                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Powers Crystal               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Muchiteni Tshaka Tapuwa      | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Welliver Robert Charles Jr   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Piazza Ashley G              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Weintraub Lauren             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Nair Arjun                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Zhang Li                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Smith Brendon                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



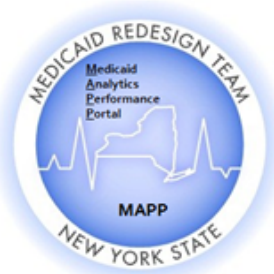
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| Participating in Projects |  |       |         |       |         |       |       |        |       |         |       |        |
|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Batool Asra               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Farooqi Wiqar             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Omorogbe Tina             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Chandolias Nikolaos       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Doehler Jocelyn E         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rajan Shobana             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rittenhouse Kathy         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Trevail Molly             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Harris Judy Ann           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lingbloom Andrew L        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Demmitt Andrew K          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Oreilly Kevin T           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Baxter Kelly A            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Alvarez Nicole D          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Patil Vinit V             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Dascher M Catherine       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Valerice Stania           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Laskey Sarah              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Metwally Mark             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Radu Gabriel              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rothman Deborah           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Weinreb David             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Cullen Kathryn            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rijhsinghani Asha         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chanofsky Shannon         | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Grover Surender S         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Nguyen-Chavez Killauda    | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Bertasso Karen            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Micca Emily S             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Berger Ashleigh           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mcmahon Laura             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Blasch Penelope           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Whitton Karen Ms.         | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Haight Susan              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Sciacca Cheri             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Keane Kimberly X          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Sundaram Vishalakshi      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Garla Sreenivas           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Peace Kristen             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lisinschi Adriana         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Majewski Maegan Elizabeth | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Tucker Cheryl S           | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Calderon Vanessa V        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Espinoza Liz Ms.          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Frasier Charz             | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Kerins Elizabeth          | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Marshall Jonah Scott Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hundertmark Janet Ms.     | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nathan Jerry              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |
| Philhower Carol           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Seguinot Elizabeth Ms.    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Hill Rachel               | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |
| Gargiulo Janet Elaine Md  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Doti Christopher Warren   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Stacey Sarah R            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Maclellan Allison M       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Monzur Mohammed Ali Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Scott Walter              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Estrada Fabiola Alisson   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mehta Swati               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lazarus Sol               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hughes Cindy Weiss Md     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |

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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Schulman-Marcus Joshua    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Winters Brooke            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Payne Andrew              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Newey Laura Rebecca       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rizzo Christopher J Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |
| Keating Elizabeth         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cramer Judy               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Waters Timothy Robert     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cowder Gulnaz Md          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Arcuri Theresa M          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Wall Martha               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Fraser Michelle           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Connor Cindy              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Banbury Steve             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Beyer Robert              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Infantino Benjamin        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Yager Janet               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Feinberg Zachary Allan    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mcbean Dacia              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Michaels Rachel Mrs.      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kinoshita Shiori          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Ferdinand Francis Darrell | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Murphy Kathleen A Cnm     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Williams David C          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Barraclough Victor        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mami Ahmed                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Griggs Lee                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lavelle Daniel Thor       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ghauri Sabira Bilqees Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gross Julia M             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Anderson Marilyn          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |



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|--|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name  | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Tichich Jennifer Brown   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hogan William James Dds  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Hoosier-Paty Dawn Michelle                                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Kittell Jennifer   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Papa Katy Lynn   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Kaufman Lawrence S Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Mcmahon Scott F  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fritz Jeannene   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gordon Peter Eliot Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Williams-Weekes Terri A  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Ulster-Greene Arc - Rehab Clinic: Persad-Sikula, Jennifer (Ot) | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Beach Deborah  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Mary Annelle Collins   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| D'Arcy Edward  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mackert Susan  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Mccafferty Gaye  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Lenic Kathleen   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Shawna Debonis   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Polynice Beatrice Ms.  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Falduti James  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mcintyre Elizabeth M   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Meagher Colin Patrick  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Priest Michael Richard   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cavaliere Rosella Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Sarmiento Augusto Salvosa                                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Paravella Dana W   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Miano Michael Mr.  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Glaser Jordan  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Johnson Abigail Ruth   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Samy Sanjay Anantha Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Racela Gene  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

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| Participating in Projects  |  |       |         |       |         |       |       |        |       |         |       |        |
|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Brangaitis Sara            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stephenson Lisa            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Poulos Artemis E           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     | ✓      |       |         | ✓     | ✓      |
| Langford Stacey            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Chaudhary Faisal Rashid    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Telisky Ashley             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Simmons Betty              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Sheehan Kelly L            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mathai Gimi                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Brayton Deanna             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cunningham Bobbi           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rodenmayer Wade Harold Rpa | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tierney Rachel M           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gicewicz Adam              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Enright Caitlin Ms.        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Chernoff Daniel Michael Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Merante Laura              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bonner Lori Lee            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kang Harriet Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Taormina Nancy             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| O'Brien Jane               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hasnain Mujtaba A          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gildener-Leapman Neil      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Millett Morgan             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kersh Emma                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Jeannine Marie Rother      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Matthews Elizabeth Susan   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shou Jason Dr.             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Montondo Melinda           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Savage Colleen Dunn Md     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Choudhary Madhuchhanda Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |





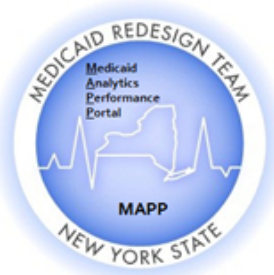
## New York State Department Of Health Delivery System Reform Incentive Payment Project

### DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects                                    |  |       |         |       |         |       |       |        |       |         |       |        |
|--|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name  | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gallagher Ellen E  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Bentley Tyrone   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Battu Kalyana Md   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |
| Lubna Valliani   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Ulster-Greene Arc - Rehab Clinic: Fried, Jilian (Slp)        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Forster-Green Jennifer Mrs.                                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Williams Eric Taylor   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Murray Sherrie L   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Moll Peter Raymond   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rowney Andrew  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Shaw Daniella Ms.  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Sandbach Katherine Ashley                                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Oliveri Courtney   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Ulster-Greene Arc - Rehab Clinic: Koim-Walsh, Katherine (Pt) | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kim Kelly-Ann  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ellery Joan  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Foster David E   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Monrroy Prado Mauricio Ricardo                               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gilbertson Dorothy   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sherer Yiping  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Janasek Karolina   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kirkpatrick Yulia Alexandrovna                               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Salenger Page Valery Md                                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kim Chong  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Knapp Robin Gail Cnm   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Redmond Heather  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Defreest Lori  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Venugopal Sushma   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Werner Nancy   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Barhydt Echi   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Akuoko Nana  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



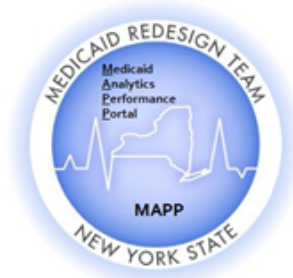
**New York State Department Of Health  
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|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Chaphe Carol              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Daniels Karen             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Carroll Kathleen          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Snyder Martha             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wallis Warren M           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chang Robert Dds          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Moses Eric Daniel Md      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rashid Numan              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Homan Suzanne Michelle    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bernstein Vanessa         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lucca Samantha            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stalker Alicia            | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gandarillas Jesus M       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| O'Brien Daniel            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Mcneilly Jennifer         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Brendese Stephen C        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Lafortune Yarnell         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Enzien Petra Victoria Dds | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Yamin Mary Christine      | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Merrill Gary Stott Do     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schoch Kim Elizabeth Dale | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Coletti Jamie L           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tourtellott Lauren        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Ambati Shashikant         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stoecklin William         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mursi Hanan               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Vivencio Maria            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shkolnik Boris            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Brewer Brandy Yvette      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Weitzel Megan Adele       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bushart Matthew Thomas    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



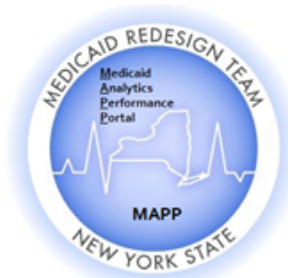
New York State Department Of Health  
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|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Sanderson Kaya Miss          | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Brunet Katelyn               | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Biscossi Michele Lee         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Israel Claudia               | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Veet Deanna Marie            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Duncan Pamela                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Gabriel Nancy                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       | ☑     |        |       |         |       |        |
| Dall Jacqueline Aimee        | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     |        | ☑     |         | ☑     | ☑      |
| Espiritu Marvee Gay Santiago | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Black Mandy                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Cabuhat Aleta                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Forget Jeffrey               | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Zack Yelena S                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Andre Rachel Mary            | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       | ☑     | ☑      |       |         | ☑     | ☑      |
| Milham Carrie Anne           | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |
| Yellen Jacob                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Judge Erin M                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Barlin Joanne Nuqui          | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Cornish Chad Matthew         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Gilmore Kelli                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Carr Catina                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Lamar Stacey Anne            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Debarbieri Victoria Marie    | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Bombard Tiffany              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Green Elizabeth Anne         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Menshausen Amber             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Rice Bradley Michael         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Deanda Abelardo Md           | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Fay Mary E                   | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Washburn Kate                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       |         |       |       |        | ☑     | ☑       |       | ☑      |
| Utter Lauren                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |



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| Participating in Projects    |  |       |         |       |         |       |       |        |       |         |       |        |  |
|------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Hegel Rebecca                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Blanchard Raymond Mr.        | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Foley Jeffrey A              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Prichett Janice              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       |         |       |       |        | ☑     | ☑       |       | ☑      |  |
| Rubin Abigail Ann            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Morgan John                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Lafif Zeshan                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Zanetti Alexandra            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |  |
| Sellnow Kathleen             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |  |
| Crawley Claire Ms.           | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Reid Derrece Kaliesha        | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Whalen Shane                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |  |
| Wolf Lisa J Rpa              | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Carsillo Vincent James Li Do | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Krampert Ryan                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Newman Mary Jane             | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Heather Coe Pa               | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Subik Maria                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Hoffman Jill Diane           | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Hindson David Fessler        | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Boone Cheyenne Allen         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Colby Jacob                  | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |  |
| Scott Rachel                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Gosnell Laura Catherine      | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Rossignol Darcy              | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Narayan Sarah                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Postal Madge                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Monroe Lucas                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Salgado Marlon               | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Carey Jamie                  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |  |
| Kohan Victoria               | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |  |



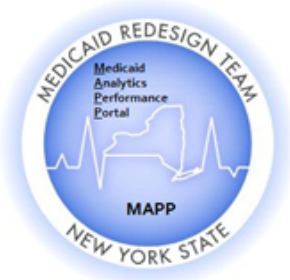
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|--|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name  | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Lemke David  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bruno Natalie  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Randazzo Carol   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Foyt David Md  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Giuffrida Lashawnda L                                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Eastman Michelle Lee                                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Miller Linda   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Reese Linda Jeanne                                       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Ursillo Christopher Ryan                                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Leifer Ann   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Reilly Michael J Md                                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lewis Kathleen T   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Ulster-Greene Arc - Rehab Clinic: Foster, Richard (Lmsw) | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lieberum Bridget   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Carlin Kristine Marie                                    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hodes Jamie L  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Penesso Tara   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Oby Stephen  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Wolfe Heidi  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Keeley Lauren  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Lynch Timothy Joseph Francis Dds                         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Barrett Emily Ms.  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sweigart-Voak Rachel                                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gordon Shelley   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cooper Benjamin Z Md                                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Voccia Ryan James  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lesson Catherine Ann                                     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schramm Charles  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Guilfoyle Gary Owen                                      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Shinaishin Mamhoud Akif                                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mcguire Judith   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



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|---|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name   | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Provost Justin Alan                                     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Warner Courtney Jill                                    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Ferris Jaime  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Melendez Maureen  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Staley Michelle   | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Fagan Tana Lee  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Mcdade Rowena   | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Driscoll Sarah  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Rai Sonia   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Dodge Amelia  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Ulster-Greene Arc - Rehab Clinic: Chase, Barbara (Lmsw) | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Lee Hwa   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Livshits Julia  | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Ochal Michelle  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       | ▼     |        |       |         |       |        |   |
| Nagaraj Sharita   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      | ▼ |
| Sparbeck Nicole   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Donovan Sean  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Chang Andrew Md   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Malhotra Anuj   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      | ▼ |
| Ilowit Emily Katharine                                  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      | ▼ |
| Lee Sharon  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Bravo Enrico A  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Woodard Jennifer  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Casivant Belinda M                                      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Maxwell Lois  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Ungerland Michael J Rpa                                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Hyde Natalie Ann  | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      | ▼ |
| Gobunsuy Romel  | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Farnsworth Wayne J Md                                   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Zeronda Stephanie Rpa                                   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Su Xiao   | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |



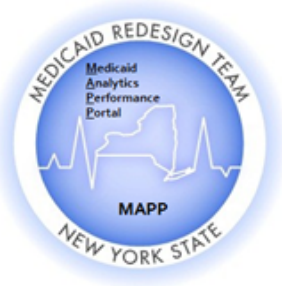
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|----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name              | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Nichol Carrie Burgess      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Denio Diana M              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Le Christopher             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Sugent-Gray Linda J        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Turner Latasha M           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Cote Amanda Pauline        | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Guldenstern Erin           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kozak Craig Robert         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gearwar David C            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rosario Frances            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Leone Tracey Ms.           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Blanc Nathalie             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Bedinotti Ingrid           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Williams Kathleen          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Middleton Laura Ms.        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Friel Briana               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Abraham Lisa Puthuparampil | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Van Meter Jr Charles       | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hoffman Loretta            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dirusso Michael T          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Miron Carrie Beth          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shepard Timothy Folsom     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gleason Zachary M          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Dagwell Lovejoy Deborah    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Weinberg Gerard Md         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tolosky Barbara            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| O'Connor Emily Marie       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Thompson Sandra Marie Np   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Di Lullo Joseph Matthew Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Sokaris Stephen John Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sharlow Joan G Rpa         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



New York State Department Of Health  
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DSRIP Implementation Plan Project

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| Participating in Projects |  |       |         |       |         |       |       |        |       |         |       |        |   |
|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Farren Seth Timothy       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Maitland Cecelela Y Md    | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Morihisa John             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Murphy Denise             | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Kwon Anne                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Wasacz Enid               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Wolner Ron K              | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Nordhauser Micaela Urbano | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |   |
| Weiss Richard G Md        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Cerda Jorge Md            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Geis Gina                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Woodley Carlton Anthony   | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Abdullah Mishal           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Buzzola Rino Alberto      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Walke Ashley Danielle     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Locaputo Jenna M          | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |   |
| Lefner Jennifer           | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Hicks Steven D            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      | ▼ |
| Hida Sven                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Bradley Nina Grace        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Roberts Jordan Ms.        | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Serafini Elaine           | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Uhr Emily                 | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Seavey Donna              | Practitioner - Non-Primary Care Provider (PCP) | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Asare Kofi Sarkokie       | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Parenti Anthony Ryan      | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Manny Tara Amanda         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Kaufman Marcia            | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Kishore Pankaj Md         | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Poon Edward               | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Vanaller-Smith Joanne     | Practitioner - Non-Primary Care Provider (PCP) | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      | ▼ |





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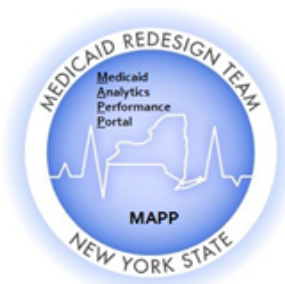
\* Safety Net Providers in Green

| Participating in Projects |  |       |         |       |         |       |       |        |       |         |       |        |
|---------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Clifford Carolann Ms.     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Tashjian Barbara J        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Freeman Beth E            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fazio Lydia Olympia       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Askew Allyson Ann         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jacobs Laura May          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kuriakose Binu Rpa        | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     |        |       |         |       |        |
| Reed Norma                | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Fiorini Jennifer          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Heidemann Patricia Ms.    | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lundgren Brandon Michael  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chaudhry Rafia Ishfaq     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Guccione Angela Lee Md    | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Pinto Dorcas Boahema      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Santell Eric R            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cornell Kathleen          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Martelle Joan M           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Casale Charles Vincent Md | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Morrissey Nancy L         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Falardeau Jodi L          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Montalvan Theresa         | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gray Christine            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Parker Megan              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Westerling Catherine      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Godfrey Daniel            | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Stepan Jovanna            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mix Rosemary              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Betts Maia                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Hubert Jonathan           | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schuck Abigail            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Phelps Kenneth R Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |

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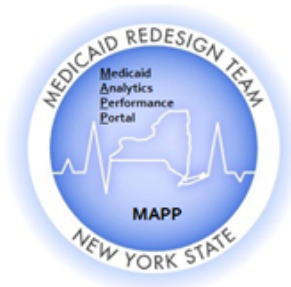
DSRIP Implementation Plan Project

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| Participating in Projects     |  |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Mcgork James Rpa              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ryan Rebecca                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Winzelberg Jay                | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Epstein Igor                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       | ✓     | ✓      |       |         | ✓     | ✓      |
| Williams Sherrie Ms.          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     |        |       |         |       |        |
| Dib Nancy Ellen               | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Lynch Patrick                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Elsagga Elizabeth             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Wasacz Christopher John       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Palms Jo-Ann                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Laruffa Gia M                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lopez Janeen Ellen            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Torticci Danielle Maria       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rajpoot Minakshi              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Kennedy Patricia Rae Md       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Oboyski Carlsen Deborah Ms.   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Clark Steve Daniel Pa         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Reach Sally                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lipson Beth                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Wagg Amber Nichole            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bekan-Homawoo Brigitte Edwige | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Scuderi Devon Lee             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Hopkins Susan                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kallin Kimberly E             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kissee Vanessa                | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Hebrank Jessica               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Diramio Amy                   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Safa Radwan Dr.               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Miller Jennifer               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wolfe Heather                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Soto Evelyn Mrs.              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |



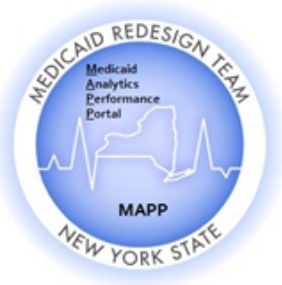
**New York State Department Of Health**  
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|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Lamanna Jeanina             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Kepner Heather Marie Np     | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Leung Anna                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Jeffrey Alfred Reynante     | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lange Amber L               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Sofia Susan                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Berger Sondra Kristen Dpm   | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Simmons Richard J           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Scordino Jessica            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pratt Kathleen Ms.          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Burrell Keisha Kay          | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Buffa Heather               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Fanning Audrey              | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Ennis Corey Elizabeth       | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Misiano Julie               | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rowden Adam Kendall Do      | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Horn James F Md             | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ali Jameel                  | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schnell Jessica Mae         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Tiesi Dayna Ms.             | Practitioner - Non-Primary Care Provider (PCP) | ✓     |         |       |         |       |       |        |       |         |       |        |
| Patel Reemaben Rajendrabhai | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Van Dyck Timothy K          | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Carney Michael              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gorham Sara                 | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Nautiyal Amit Md            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mishra Pragnyadip           | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Petrie Brandy               | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Clark Jennifer              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Azam Nyla Khalid            | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Aison Johnson Sarah         | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Rischert Bruce              | Practitioner - Non-Primary Care Provider (PCP) | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



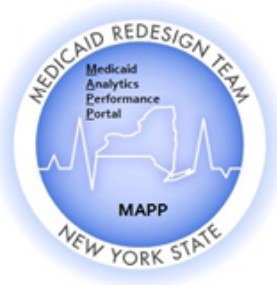
**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects   |  |       |         |       |         |       |       |        |       |         |       |        |
|-----------------------------|--|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name               | Provider Category                              | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Ramani Shoba                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Kumar Sudha Md              | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       | ☑       |       | ☑     |        |       | ☑       | ☑     |        |
| Tauber David                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Speed Stacie                | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         |       |       |        |       |         |       |        |
| Greene Julie                | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Cardinale Carmen            | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Castma Naika Clara          | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Smith-Foy Barbara           | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Boss Donna Jean             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Martin Mary Anne            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Uskach Eugenia              | Practitioner - Non-Primary Care Provider (PCP) |       |         |       |         |       |       |        |       |         |       |        |
| Tyler Christopher D         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Glozman Alexandr Josifovich | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Lyons Trent William         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |
| Haroon Omer Ahmad           | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Shemo Laura                 | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Mcwhorter Lauren            | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Debonis James M Dmd         | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Valerio Dennis J Dds        | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Nadal Laurie Lambert        | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |
| Michele Griguts             | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Bienick Kelly               | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |
| Berkovich Betsy             | Practitioner - Non-Primary Care Provider (PCP) | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |
| Matthew I Stein Md          | Practitioner - Non-Primary Care Provider (PCP) | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Samaritan Hospital          | Hospital                                       | ☑     |         |       |         |       |       |        |       |         |       |        |
| Seton Health System         | Hospital                                       |       |         |       |         |       |       |        |       |         |       |        |
| Columbia Memorial Hospital  | Hospital                                       | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Saratoga Hospital           | Hospital                                       | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Albany Medical Ctr Hospital | Hospital                                       | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |
| Teppo Deborah Lynn Lcsw     | Clinic   | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |
| Unity House Of Troy Mh      | Clinic   |       |         |       |         |       |       |        |       |         |       |        |



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|-------------------------------|-------------------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category             | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Samaritan Hospital            | Clinic                        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Seton Health System           | Clinic                        |       |         |       |         |       |       |        |       |         |       |        |
| Schenectady Cnty Public Hlth  | Clinic                        | ✓     |         |       |         |       |       |        |       |         |       |        |
| Schenectady Family Health Ser | Clinic                        |       |         |       |         |       |       |        |       |         |       |        |
| Com Hlth Ctr Of Smh & Nlh Inc | Clinic                        | ✓     | ✓       |       | ✓       | ✓     |       |        |       | ✓       | ✓     | ✓      |
| Planned Pthd Mohawk Hudson    | Clinic                        | ✓     |         |       | ✓       | ✓     | ✓     |        |       |         | ✓     |        |
| Albany County Health Dept     | Clinic                        | ✓     |         |       |         | ✓     |       |        | ✓     | ✓       |       |        |
| Ucp Assn Of The Capital Dist  | Clinic                        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Whitney M Young Health Center | Clinic                        | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| Greene Cy Public Hlth Nursing | Clinic                        | ✓     |         |       |         | ✓     |       |        |       |         | ✓     | ✓      |
| Greene Cnty Pub Hlth Nurs Ser | Clinic                        | ✓     |         |       |         | ✓     |       |        |       |         | ✓     | ✓      |
| Columbia Cnty Health Dept     | Clinic                        | ✓     |         |       |         | ✓     |       |        |       |         |       |        |
| Columbia Memorial Hospital    | Clinic                        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Saratoga Hospital             | Clinic                        | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Upper Hudson Planned Parent   | Clinic                        | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Albany Medical Ctr Hospital   | Clinic                        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pp Of Mid-Hudson Valley Inc   | Clinic                        |       |         |       |         |       |       |        |       |         |       |        |
| Ridge Health Services Inc     | Clinic                        |       |         |       |         |       |       |        |       |         |       |        |
| Parsons Child And Family Ctr  | Clinic                        | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Omrdd/Support-Link Inc Cd     | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |
| Unity House Of Troy Mh        | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |
| Mental Health Association In  | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |
| Samaritan Hospital            | Case Management / Health Home | ✓     |         |       |         |       |       |        |       |         |       |        |
| Albany Cnty Dept/Child Y&F Mh | Case Management / Health Home | ✓     |         |       |         |       | ✓     | ✓      |       |         |       |        |
| Omrdd/Center For Disabled Sun | Case Management / Health Home | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Green County Mental Hlth Mh   | Case Management / Health Home | ✓     | ✓       |       |         | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Omrdd/Devereux Foundation     | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |
| Mha Of Columbia-Greene Mh     | Case Management / Health Home | ✓     | ✓       |       | ✓       |       |       | ✓      |       |         | ✓     | ✓      |
| Omrdd/Center For Disabled-Ta  | Case Management / Health Home | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Omrdd/Cath Charities Dds-Ta   | Case Management / Health Home | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Omrdd/Wildwood Programs-Cd    | Case Management / Health Home | ✓     |         |       | ✓       |       |       | ✓      |       | ✓       | ✓     | ✓      |



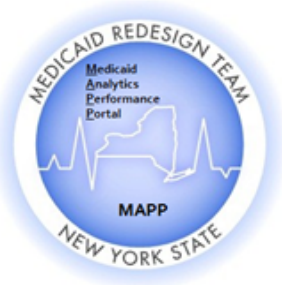
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|------------------------------------|-------------------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name                      | Provider Category             | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Omrdd/Schenectady Arc              | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Resource Ctr/Acc Liv-Ta            | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Warren/Washington Arc        | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Living Resources Corp        | Case Management / Health Home | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |   |
| Omrdd/Gateway Community Ind        | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Family & Child Svc           | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Dutchess Co Arc              | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Devereaux Foundation-Ta      | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Omrdd/Columbia County Arc          | Case Management / Health Home | ▼     |         | ▼     | ▼       |       |       | ▼      | ▼     |         | ▼     |        |   |
| Omrdd/Center For Disabled-Cd       | Case Management / Health Home | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Omrdd/Cath Charities Dds-Cd        | Case Management / Health Home | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Omrdd/Alternative Liv Grp          | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Clearview Center Mh                | Case Management / Health Home | ▼     | ▼       |       |         |       | ▼     |        |       |         | ▼     | ▼      |   |
| Astor Home For Children Fbt        | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Catholic Charities/Albany Ai       | Case Management / Health Home | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Aids Council Of Neny Ai            | Case Management / Health Home | ▼     | ▼       |       | ▼       | ▼     |       | ▼      | ▼     |         | ▼     | ▼      |   |
| Rehabilitation Supp Svcs C         | Case Management / Health Home | ▼     | ▼       |       | ▼       |       |       | ▼      | ▼     |         | ▼     | ▼      |   |
| Columbia Cty Mh Ctr Mh             | Case Management / Health Home | ▼     | ▼       |       |         | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Transitional Svcs Assoc Inc        | Case Management / Health Home | ▼     | ▼       |       | ▼       |       |       | ▼      |       |         |       |        |   |
| Schenectady County Pub Hlth        | Case Management / Health Home | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Albany County Mh                   | Case Management / Health Home | ▼     |         |       |         | ▼     | ▼     | ▼      |       |         | ▼     |        |   |
| Rensselaer Cnty Unified Mh         | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Visiting Nurs Svc/Schtd & Sar Cnty | Case Management / Health Home | ▼     | ▼       |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |   |
| Albany County Doh Div Of Nurs      | Case Management / Health Home | ▼     |         |       |         | ▼     |       |        | ▼     | ▼       |       |        |   |
| Columbia Cy Dept Of Health         | Case Management / Health Home | ▼     |         |       |         | ▼     |       |        |       |         |       |        |   |
| Greene Cy Public Hlth Nursing      | Case Management / Health Home | ▼     |         |       |         | ▼     |       |        |       |         | ▼     | ▼      |   |
| Opwdd/Support Link Msc Sunmount    | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Parsons Child And Family Ctr       | Case Management / Health Home | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Schenectady Arc                    | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Dutchess Co Arc                    | Case Management / Health Home |       |         |       |         |       |       |        |       |         |       |        |   |
| Hubbell Jr Robert                  | Mental Health                 | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |



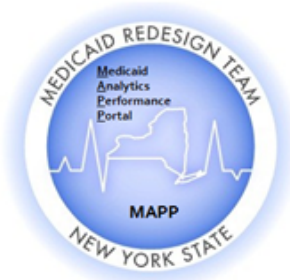
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| Provider Name                      | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Goodemote Melissa                  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Swaminathan Jyoti                  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Abel-Bogner Lisa                   | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Monaco Barbara                     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Torregrossa Martha                 | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Gellert Jane Carla Phd             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Tohtz Damon Alaric                 | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| PROMESA                            | Mental Health     | ▼     |         |       |         |       |       | ▼      |       |         | ▼     | ▼      |
| Blossy Christine                   | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Khalil Hani L                      | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Huber-Villano Patricia             | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Remson Karen M Np                  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Krishnappa Kachigere Siddegowda Md | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Unity House Of Troy Mh             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Israel Claudia                     | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc                  | Mental Health     | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Vengrin Jana Gale Np               | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Lacy Peter Charles                 | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rossetti David                     | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Amoroso Jennifer Lcsw              | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Graham Margaret                    | Mental Health     | ▼     | ▼       |       |         | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| McGinn Arthur                      | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hudson Valley Mental Hlth Ln       | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mcdonald Katherine G               | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mohawk Opportunities Inc           | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Schaefer Bianca                    | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mental Health Association In       | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Cunningham Cathryn Courtney        | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chaudry Shahina K Lcsw             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Northeast Parent Child Societ      | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Fazio Lydia Olympia                | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Nadal Laurie Lambert          | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Samaritan Hospital            | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Albany Cnty Dept Child Family | Mental Health     | ▼     |         |       |         |       | ▼     | ▼      |       |         |       |        |  |
| Kishore Pankaj Md             | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gabay Michelle                | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Potenciano Angelo             | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Han Jihuk                     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Mittal Peeyush Md             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Simor Ginger Md               | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kennedy Tracy                 | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Di Lullo Joseph Matthew Md    | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Sciacca Cheri                 | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Packard Regina                | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Gregg Michael                 | Mental Health     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Burke Jessica Narr Phd        | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Fredenberg Jason R            | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Dodd Jack Edward Jr           | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pericak Arlene                | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Albany County Comm Svs Board  | Mental Health     | ▼     |         |       |         | ▼     | ▼     | ▼      |       |         | ▼     |        |  |
| Tashjian Barbara J            | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Ranges Mary E                 | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Newsome Donna                 | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Adamczak Julita Rae           | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Abdelhamid Ayman              | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Allen Christine               | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kleyman Emily Phd             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Rana Nirmala Psy.D            | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Green County Mental Hlth Mh   | Mental Health     | ▼     | ▼       |       |         | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Barba Anne Lauren Phd         | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Dorflinger Joseph Lcsw        | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Nikiforov Konstantin Md       | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |





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|------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Achar Naveen Md              | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mha Of Columbia-Greene Mh    | Mental Health     | ▼     | ▼       |       | ▼       |       |       | ▼      |       |         | ▼     | ▼      |  |
| Hansel Lori Csw              | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Glozman Alexandr Josifovich  | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Rodriguez-Tellez Jamie       | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Valliere Julie               | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Cowder Gulnaz Md             | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Smith-Booth Brenda Karen     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Klim Kathleen                | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Schweitzer Frances Robyn Phd | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Toole Nancy E Lcsw           | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Soscia Gina Lcsw             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Peters Robert Lcsw           | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Khan Tabassum Y Md           | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Morris Adrian Anthony Md     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Doyle Melissa M Csw          | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Laguerre Julius J            | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Inghilterra Karen            | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kulkarni Subash              | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Oberg Gary David             | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ehrenberg Eileen             | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Bourke Diane A Md            | Mental Health     | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Corbin Jeffrey S Md          | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Winseman Jeffrey Scott Md    | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Aronson Cynthia L Csw        | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Albany Medical College       | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shif Mark Md                 | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Wolner Ron K                 | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Wallis Warren M              | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Tucker Cheryl S              | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Roldan Ernesto               | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |



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|------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Padi Madhu                   | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Nordhauser Micaela Urbano    | Mental Health     | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Gillen Robert W Phd          | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mendola Antony J Md          | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| James Ronald M               | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Plotkin Richard Eric Md      | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Astruc Manuel Md             | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Merrill Gary Stott Do        | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Van Dyck Timothy K           | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Clearview Center Mh          | Mental Health     | ▼     | ▼       |       |         |       | ▼     |        |       |         | ▼     | ▼      |
| Astor Home For Children Fbt  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| St Catherines Ctr/Child Fbt  | Mental Health     | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Rtf Hs Of The Good Shepherd  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Workshop Inc, The            | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Hazen Gordon Rpac            | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lasalle School Inc           | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Gateway Community Industries | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Capital District Psych Ctr   | Mental Health     | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |
| Sussman Daniel L Md          | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Rehabilitation Supp Svcs C   | Mental Health     | ▼     | ▼       |       | ▼       |       |       | ▼      | ▼     |         | ▼     | ▼      |
| Columbia Cty Mh Ctr Mh       | Mental Health     | ▼     | ▼       |       |         | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Transitional Svcs Assoc Inc  | Mental Health     | ▼     | ▼       |       | ▼       |       |       | ▼      |       |         |       |        |
| Philmont Hearth Inc          | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nijjar Gurkirpal S Md        | Mental Health     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Carino Aurora L Md           | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Marcus Dennis Carl Md        | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Amyot Edmond Md              | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Harnick Robert Md            | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Priest Michael Richard       | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Four Winds Saratoga          | Mental Health     | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |
| Krugley Richard A Md         | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |



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|------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Persaud Vyas Durga Md        | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Woodhouse Richard Phd        | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Sandler Steven Md            | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Capital District Pc          | Mental Health     | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Kolahifar Jafar Md           | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Saratoga Cnty Comm Svcs Brd  | Mental Health     | ▼     |         |       |         | ▼     |       | ▼      |       |         | ▼     | ▼      |  |
| Scherer Harvey D             | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Albany Cnty Community Svc Bd | Mental Health     | ▼     |         |       |         | ▼     | ▼     | ▼      |       |         | ▼     |        |  |
| Kaplan Mitchel A Md          | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Krakower Leon A              | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Mitchell Robert Alexander Md | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Menzel Charles H Md          | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Capital District Pc          | Mental Health     | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Tassinari Robin Baker Md     | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Columbia Memorial Hospital   | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Saratoga Hospital            | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical Ctr Hospital  | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gottlieb Howard P Md         | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Greenman Lawrence A Md       | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Oommen Shobin Md             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Carruthers Jay               | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Van Meter Jr Charles         | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Standefer James              | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Samenfeld-Specht James       | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Higgins Erin                 | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Hebrank Jessica              | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Heather L Juby               | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Moffatt Jean                 | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Schwartz M Miles             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |  |
| Brady Christina Marie        | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Racela Gene                  | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |  |



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| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Sandra L Foster                     | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |   |
| Samuels Barbara Nan                 | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Adger-Antonikowski Angela           | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Daniels Karen                       | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |   |
| Leo Carol                           | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Penesso Tara                        | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |   |
| Brunelle Trudy                      | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |   |
| Zacher Megan Marie                  | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Knight William                      | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Demadaler Elyse                     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Greene Jill                         | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |   |
| Mcmahon Scott F                     | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Pieterse Portia Lucille             | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Balkoski Victoria                   | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kulzer Daniel                       | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Stephen Larson                      | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Ghuri Sabira Bilqees Md             | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Amanda Jill Clemence                | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Loeber Russell                      | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Rehabilitation Support Services Inc | Mental Health     | ✓     | ✓       |       | ✓       |       |       | ✓      | ✓     |         | ✓     | ✓      |   |
| Elnagar Khalid Abdelsalam           | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Vena Stephen Albert                 | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Mueller Benjamin                    | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Brula Abdul Qadir                   | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Berger Niel Phd                     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Jared Scott Jerome                  | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Rillo Bella Dizon                   | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Parsons Child And Family Ctr        | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |   |
| Albany Medical College              | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Malone Patricia                     | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |   |
| Iyer Aparna                         | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |   |



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| Provider Name             | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Zack Yelena S             | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Mamot Baker Margaret      | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Leung Anna                | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Mazo Francisco            | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lukowitsky Mark           | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Durham-Fowler Jennifer A  | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Jeffrey Alfred Reynante   | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Andre Rachel Mary         | Mental Health     | ✓     |         |       |         |       | ✓     | ✓      |       |         | ✓     | ✓      |
| Shapiro Lois A            | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Krull Joanna R            | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Kim Chong                 | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gordon Shelley            | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Lee Jamison               | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Monsour Sophia            | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Slocum Christine N        | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Liss Allison              | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Horvath David             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Debarbieri Victoria Marie | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cohen Donna Marie         | Mental Health     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gray Wendy Jo             | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Coloprisko Sara Ann       | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lewis Heather             | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |
| Bromley Nicole            | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Yager Jennifer M          | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Crosier Amanda            | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dillon Jessica L          | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Bernardi Shaina           | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lee Minsun                | Mental Health     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Berkovich Betsy           | Mental Health     | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Smith Brendon             | Mental Health     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chanofsky Shannon         | Mental Health     |       |         |       |         |       |       |        |       |         |       |        |



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| Provider Name                    | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Bentley Tyrone                   | Mental Health     | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |   |
| Mursi Hanan                      | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Leifer Ann                       | Mental Health     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Petrie Brandy                    | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Lucca Samantha                   | Mental Health     | ▼     |         |       |         |       |       |        |       |         |       |        |   |
| Haroon Omer Ahmad                | Mental Health     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| P R O M E S A                    | Substance Abuse   | ▼     |         |       |         |       |       | ▼      |       |         | ▼     | ▼      |   |
| Pearl Street Counseling Cente    | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Senior Hope Counseling Inc       | Substance Abuse   | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |   |
| Never Alone Inc                  | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Seton Health System              | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Child & Fam Guid Ctr Adict Sv    | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Lasalle School Inc               | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Conifer Park                     | Substance Abuse   | ▼     |         |       |         |       | ▼     |        |       |         |       |        |   |
| Hope House, Inc.                 | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| 820 River Street Inc.            | Substance Abuse   | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Addictions Care Ctr Of Albany    | Substance Abuse   | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Twin Cty Recovery Svcs Inc       | Substance Abuse   | ▼     |         |       |         |       |       | ▼      |       |         | ▼     | ▼      |   |
| Depaul Addiction Services Inc    | Substance Abuse   | ▼     |         | ▼     |         |       |       |        |       |         |       |        |   |
| Saratoga Cnty Comm Svcs Brd      | Substance Abuse   | ▼     |         |       |         | ▼     |       | ▼      |       |         | ▼     | ▼      |   |
| Alcoholism Council Schen Cnty    | Substance Abuse   |       |         |       |         |       |       |        |       |         |       |        |   |
| Albany Cnty Community Svc Bd     | Substance Abuse   | ▼     |         |       |         | ▼     | ▼     | ▼      |       |         | ▼     |        |   |
| Whitney M Young Health Center    | Substance Abuse   | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |   |
| Belvedere Health Services Llc    | Substance Abuse   | ▼     | ▼       |       |         |       | ▼     |        |       |         |       |        |   |
| Wingate At Beacon                | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Carillon Nrs Rehab Ctr Adhc      | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Ten Broeck Commons Adhc          | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Wingate Of Ulster                | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Wingate At Dutchess Inc          | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Whittier Rehab & Skilled Nrs Ctr | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |
| Orchard Nursing & Rehab Ctr      | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |   |



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| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Fernduff Nursing Hm Non Occ         | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Daughters Of Sarah Non Occ          | Nursing Home      | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Kaaterskill Care Skilled Nrs & Reh  | Nursing Home      | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Home For Aged Blind Adhc/Aadc       | Nursing Home      | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| East Neck Nursing & Rehab Ctr       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Van Rensselaer Manor Snf            | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| The Springs Nursing & Reh Ctr       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Stanton Nursing & Rehab Cente       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Peninsula Gen Nursing Home          | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Komanoff Ctr/Geriatric Rehab        | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Avenue Nursing & Rehab Ctr Sn       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| St Margarets Center                 | Nursing Home      | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Teresian House Nrsg Hm Co Inc       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Poughkeepsie Crossings              | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Catskill Crossings                  | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Evergreen Commons Snf               | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Glens Falls Crossings               | Nursing Home      | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Mountain View Nrs & Reh Ctr         | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Shore View Nursing Home             | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Morningside House Nursing Hom       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Albany County Nursing Home          | Nursing Home      | ▼     |         |       |         |       |       |        |       |         |       |        |
| Dutchess Ctr Rehab Healthcare       | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Sea-Crest Health Care Center        | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Barnwell Nursing & Rehab Cent       | Nursing Home      | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Rosewood Rehabilitation & Nrs Ctr   | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Mills Pond Nursing & Rehab Ctr      | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Julie Blair Nrsg & Rehab Cntr       | Nursing Home      | ▼     |         |       |         |       |       |        |       |         |       |        |
| Fulton Center Rehabilitation & Heal | Nursing Home      | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rsmc Llc                            | Nursing Home      | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Csmc Llc                            | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |
| Jopal Sayville Llc                  | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |



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| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Jopal Bronx, Llc                    | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |  |
| Ncrnc, Llc                          | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |  |
| Golden Hill Planning Corp           | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |  |
| Livingston S & V Operations Llc     | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |  |
| Evergreen Commons Rehab & Nursing C | Nursing Home      |       |         |       |         |       |       |        |       |         |       |        |  |
| Walgreen Eastern Co Inc             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of So Burlington      | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Schoch Kim Elizabeth Dale           | Pharmacy          | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Martins Foods Of So Burlington Inc  | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Walgreen Eastern Co Inc             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of So Burlington Inc  | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Walgreen Eastern Co Inc             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Food Of South Burlington    | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of South Burlington   | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Walgreens Eastern Co Inc            | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Price Chopper Operating Co Inc      | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Four Corners Pharmacy Llc           | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Price Chopper Operating Co In       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martin'S Foods So Burlington        | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of So Burlingto       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Price Chopper Operating Co In       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods So Burlington I       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Cutie Pharma-Care Inc               | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Golub Corpration,The #196           | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Golub Corporation The #191          | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods So Burlington         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of S Burlington       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martins Foods Of So Burling I       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Golub Corporation The               | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Martin'S Foods So Burlington3       | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |
| Golub Corporation #186              | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |  |





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| Martins Foods Of S Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Price Chopper Operating Co In | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlington   | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation #042        | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of S Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The #003    | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Empire Home Infusion Svc Inc  | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlington   | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martin'S Food Of S Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martin'S Food Of S Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| <b>Seton Health System</b>    | <b>Pharmacy</b>   |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlington I | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlngtn 320 | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of So Burl 391  | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martin Foods Of So Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlington   | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation             | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods So Burlington   | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martins Food Of So Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Gem Drug Corporation          | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Martin Foods Of So Burlington | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| The Golub Corporation Price C | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation The         | Pharmacy          |       |         |       |         |       |       |        |       |         |       |        |



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| Provider Name   | Provider Category             | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Watervliet Pharmacy Inc   | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Marra S Pharmacy Inc  | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Planned Pthd Mohawk Hudson  | Pharmacy                      | ✓     |         |       | ✓       | ✓     | ✓     |        |       |         | ✓     |        |
| Albany Medical Ctr Hospital                                       | Pharmacy                      | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Walgreen Eastern Co Inc 10955                                     | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of So Burlington                                    | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreen Eastern Co Inc 10752                                     | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreen Eastern Co Inc #09971                                    | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreen Eastern Co Inc 11841                                     | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreen Eastern Co Inc 11639                                     | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of So Burlington                                    | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreens Eastern Co Inc  | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreens Eastern Co Inc  | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Walgreens Eastern Co Inc  | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation   | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Kinney Drugs Inc  | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of South Burlington I                               | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of South Burlington                                 | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Martins Foods Of South Burlington                                 | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Town Total Health Llc   | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Town Total Health Llc   | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Golub Corporation   | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Albany Medical Center   | Pharmacy                      | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Martins Foods Of South Burlington L                               | Pharmacy                      |       |         |       |         |       |       |        |       |         |       |        |
| Community Hospice Inc   | Hospice                       |       |         |       |         |       |       |        |       |         |       |        |
| Alcohol And Substance Abuse Prevention Council Of Saratoga County | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Alissa Debaun   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Black Nurses Coalition, Inc.                                      | Community Based Organizations | ✓     |         |       |         | ✓     |       |        |       |         |       |        |
| Boces Capit   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Brenda Robinson   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Capital District Ymca   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |



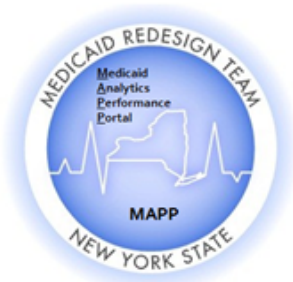
**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

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| Participating in Projects  |                               |       |         |       |         |       |       |        |       |         |       |        |
|--|-------------------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name  | Provider Category             | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Capital Region Boces   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Catholic Charities Of Columbia And Greene Counties               | Community Based Organizations | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Catholic Charities Senior And Caregiver Support Services         | Community Based Organizations | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Catskill Hudson Area Health Education Center                     | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Charles Kite   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Community Caregivers   | Community Based Organizations | ▼     | ▼       | ▼     | ▼       | ▼     |       |        |       |         |       |        |
| Compeer, Inc.  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Consumer Directed Choices, Inc.                                  | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management                                       | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Bishop Broderick Apartments          | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Bishop Hubbard Senior Apartments     | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Branson Manor Senior Apartments      | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Cabrini Acres Senior Apartments      | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Carondelet Commons Senior Apartments | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Father Leo O'Brien Senior Community  | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Fontbonne Manor Senior Apartments    | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Franciscan Heights Senior Community  | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Marie-Rose Manor                     | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: Sanderson Court Senior Apartments    | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: St. Jude Apartments                  | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: St. Vincent'S Apartments             | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| De Paul Housing Management: The Lawrence Commons                 | Community Based Organizations | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Greene County Rural Health Network                               | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Healthy Capital District Initiative                              | Community Based Organizations | ▼     |         |       |         | ▼     |       |        |       | ▼       |       |        |
| Hope House, Inc.   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |
| Hudson Mohawk Area Health Education Center                       | Community Based Organizations | ▼     |         |       |         |       |       |        |       |         |       |        |



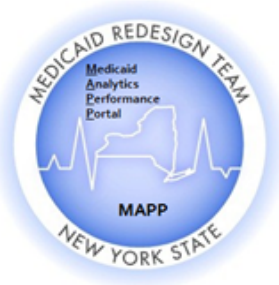
**New York State Department Of Health  
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**Albany Medical Center Hospital (PPS ID:1)**

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|---|-------------------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name   | Provider Category             | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| In Our Own Voices, Inc.   | Community Based Organizations | ☑     | ☑       |       |         | ☑     |       | ☑      |       |         | ☑     | ☑      |  |
| Indepdent Living Center Of The Hudson Valley, Inc.  | Community Based Organizations | ☑     |         |       |         | ☑     |       |        |       |         |       |        |  |
| Interfaith Partnership For The Homeless   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Jillian Herrington, Np  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Katherine Hughes  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Lynn M. Scott   | Community Based Organizations | ☑     |         |       | ☑       |       | ☑     |        |       | ☑       | ☑     |        |  |
| Matthew C. Aoun   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Mei Yu Ren  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Mental Health Assosication Of Nys   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Mental Health Empowerment Project, Inc.   | Community Based Organizations | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Nicole Riley  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Ny Start  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Rhonda M. Esposito  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Shelters Of Saratoga  | Community Based Organizations | ☑     |         |       |         | ☑     |       |        |       |         |       |        |  |
| Siba Haykal   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| St. Paul'S Center, Inc.   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| The Alternative Living Group, Inc.  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| The Next Step, Inc.   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| The Quality And Technical Assistance Center Of Ny - Qtac - Ny (University At Albany Foundation) | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Troy Crossings, Llc Dba The Pines At Heartwood  | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Westchester Independent Living Center   | Community Based Organizations |       |         |       |         |       |       |        |       |         |       |        |  |
| Wildwood Programs, Inc.   | Community Based Organizations | ☑     |         |       | ☑       |       |       | ☑      |       | ☑       | ☑     | ☑      |  |
| <b>Tessler Patric</b>   | <b>All Other</b>              |       |         |       |         |       |       |        |       |         |       |        |  |
| Chang Robert Dds  | All Other                     | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Tera N Hetrick-Platte Md  | All Other                     | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Dhanani Rahim Md  | All Other                     | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Schneider Nicole Marie  | All Other                     | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Iannuccillo Anthony   | All Other                     | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Larsen Karen  | All Other                     | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Jennifer White  | All Other                     | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Rasouly Yama  | All Other                     | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |



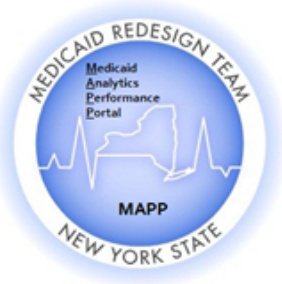
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|-----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Schoch Kim Elizabeth Dale   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pappas Mike                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Eldredge Daniel             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Uzzilia Jeffrey             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kiley Kevin                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Zanaros George Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Sullenberger Lance Eugene   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Olszowka Angelique          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Weil Dympna Lynch           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bonville Daniel James Do    | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Support Link Inc Nhtd       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dykstra Todd Bryan Rpa      | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Stetzer Lee                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Laplante Steven P           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Whiteside Beth              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Abraham Lisa Puthuparampil  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| David Jason Ellenbogen Dpm  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dolinsky Christophe         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Northrop Jennifer           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Whiteside Michael           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Martorana Sebastian Vincent | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Salimah Dhanani Md          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| William H Montgomery Jr     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Craig Maier                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Tanya Nicole Needham        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Elguero Carlos              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kathryn Hogan               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lawrence James Patrick      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mohammad Etlajjar           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lagrange Brent Foster       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Samy Sanjay Anantha Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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| Provider Name             | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Shatynski Todd            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Tariq Sayed               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wickman Douglas           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Stutz Helen Rita Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Greer Alyssa Rpa          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hazimeh Yusef Md          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Teppo Deborah Lynn Lcsw   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Madala Padmaja Md         | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Amsden Tracy Rpa          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Allison Stefanie L Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Daraban Nicoleta Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Reutzel Laura             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Noyes Kimberly            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dougherty Katherine       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chopra Rupal Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Laufer Andras Laszlo Md   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Butterfield Rebecca C Md  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Canete Jonathan J Md      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Napier Mark B Md          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Dickson Matthew J Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fitzpatrick Michael Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Yamamoto Junichi Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hanakova Marcela Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| PROMESA                   | All Other         | ▼     |         |       |         |       |       | ▼      |       |         | ▼     | ▼      |
| Doyle Robin M Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Varghese Noel Md          | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Kuo Ramsay                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Betit Alan                | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Pauze Daniel K Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Moses Eric Daniel Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Qualia Cary Michael Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Neubert Stefanie S                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Lahtinen-Aley Kristina Marie Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rohan Darren I Md                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Smitas Catherine Malone Md          | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Strauss David Noah Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lisella Jordan Mills Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Smith Marsha                        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ens Healthcare Man Llc Tbi          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Gusten William M Md                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Condry James Dearien Jr Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Raveendranath Brooke A              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Beauchamp Cara E Rpa                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Bleser Karen Md                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Angelotti Marietta Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nelson Dina S Md                    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Aboelsaad Farag Wanees Farag Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Marshall Jonah Scott Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Vasquez Deborah A Md                | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Saltzberg Stephanie Sharyn Md       | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Varone Ricky A Rpa                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Thomas James Md                     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Wolf Lisa J Rpa                     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shahata Hani L Md                   | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Wasniewski Holly L Md               | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Goetz David H Md                    | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Integrated Medical Professionals Pl | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Hinds Marcel Eldon Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Unity House Of Troy Mh              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Woolley Wendy Lee Do                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mckinney Sue Peterson Rpa           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Ulster-Greene Arc                   | All Other         | ▼     |         |       |         | ▼     |       |        |       |         |       |        |



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|----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                    | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Noori Khalid A Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bloss Christopher A Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Nguyen Hung Dinh Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Greenwald Lisa                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Deckelbaum Scott Howard Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Osborn Kyle Thomas Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Greenfield Country Medicine Pllc | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Miller Kristin M Rpa             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Yamada Jennifer Susan Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gorczyński Christopher Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Beyer Todd David Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Morgan Ayman Md                  | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Yamada Brian S                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Clark Sara N Md                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Cadigan Beth Md                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lynch Timothy Joseph Francis Dds | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Katz Benjamin S Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mann Stephanie Elise             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rodden Mary Np                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hobbs Patricia                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Owen Claudina                    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mcmaster Aimee                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Vandepol-Rimash Maria            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Burke Michael Kevin Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Phelan Donna K Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Ferrillo Martin                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Faroqui Fazal G Do               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Schuster Michael Edward          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Stephens Christopher S Rpa       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hudson Valley Mental Hlth Ln     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Pearl Street Counseling Cente    | All Other         |       |         |       |         |       |       |        |       |         |       |        |





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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Sood Vinay Md                       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Broderick Bethany Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hellwitz Frederic Jon Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Kaw Pamela Md                       | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Capello Seth Alexander              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shaffer David Richard Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Retina Consultants Pllc             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Tan Henry T Md                      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Coombes John Michael Christopher Md | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Coombes Sereena Carol Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Iqbal Anjum Md                      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Katz Linda G Np                     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Bailey Kelly Ann Np                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Verrico Ivelisse Ann Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Sgambati Carl Willard Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Szilak Illya                        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Powers Marianne Np                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Kucij Lyn Irene Rpa                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Stetzer Rebecca                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| All Metro Home Care Services Of New | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| El-Mohtar Kody Khallad Assad Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Samedov Nikolay Md                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Tarte Michelle L Rpa                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Winchester Susan B Np               | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Hildreth Deborah A Rpa              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Weaver Jacqueline Md                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Nysarc Dutchess County Day          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Living Resources Corp Day           | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Center F/Disab Svcs Day             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| The Workshop Inc Hcbs Day           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Gateway Community Ind Day           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |



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| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Devereux Foundation Day      | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Saunders Jessica Ann Md      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Zieker Christopher Robert Md | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hill Linda J Do              | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Thompson Sandra Marie Np     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Choudhary Madhuchhanda Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Catholic Char Dds Day        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Postal Eric S Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Cooper Benjamin Z Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Janice Prime Care Medical Pc | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Borrelli Karin               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Steckley Renee E Rpa         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Clark Melinda Beth Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mcbiles Mike Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nappi Anthony Gerald Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Pawlinga Christophe          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Michelena Karen X            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ludwig Samantha Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Leonidas Leonard Al Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Kim Sun Jin Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bernad Jason Edward Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Afsarkeshmiri Armin Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Flynn Dedra Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Khera Kanwarjit S Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Comley Sood Shannon Md       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| De Arup Md                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dadian Nishan                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mijovic-Das Snezana Ana H    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Blackburn Chame Curtis Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Silverstein Mesidor S Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wang Robert Shih-Ning Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |



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| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| De Elise J B Md              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Palmer Michelle N            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| O'Meara-Zimmer Kimberly J Np | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Compa Kristen Leigh Md       | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Herzog John Christopher      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Schlossberg Howard Robert Md | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pomichter John Stanley Md    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wladis Edward Joel Md        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Connors William Patrick      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Seedhom Ashraf E Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Flanagan Jean Ansari Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hickey Lynn Leitner Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Friedman Cynthia Susan       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kerr Hamish Alistair Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shir Irene                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kamal Syed Anwar Md          | All Other         | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Reynolds Frederick D         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Samaritan Hospital           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Irani Danesh S Rpa           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Horn Elizabeth C             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Zeronda Stephanie Rpa        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| King-Hall Pamela             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| D'Avella Wendy K             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Thompson Shannon E           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mcgaffin Christina E         | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Rosas Kevin E Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lloyd Adam Taylor            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hicks Steven D               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Lindstrom Jennifer E Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| German John William Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pilpel Sylvia E Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Barats Lev Leonidovich Md   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Moss Vance J Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Center F/Disab Svcs Rsp     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Ungerland Michael J Rpa     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Zamer Joshua D Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pan Phillip Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Nigam Ankesh Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shpak Mikhail M Do          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Rsp  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Gildersleeve Rebecca Ann Md | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Woodruff Barbara A Rpa      | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Campagna Kristine J Do      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Deteso Damon Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Defrancisco John Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Living Resources Corp Rsp   | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Nigam Sujatha A Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Berman Jessica Dembitz Md   | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Saunders Patricia V Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Center F/Disab Svcs Fsr 2   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Center F/Disab Svcs Fsr 1   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Jellinger Robert M Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Soab Medical Pc             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Biglane Rayma               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Sethi Dinesh Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Santiago Allan Realin Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Caiazza Margaret            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Olds Tia D Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Bughrara Nibras             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mookherjee Sulagna Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kelling Timothy Scott Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lehine Tanya                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |



New York State Department Of Health  
 Delivery System Reform Incentive Payment Project

DSRIP Implementation Plan Project

Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects    |                   |       |         |       |         |       |       |        |       |         |       |        |
|------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Blackington Colette C        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cossey Jason L               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Cytryn Jacalyn J Mdd         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Stemper Erin Clarke          | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Torres Camilo G Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Oke Benjamin                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Martin Kristen Hedger Md     | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Phelan Daniel T Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Taggert John B Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mance Joan M                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Greenblatt Carol Lynn Do     | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Spindler John B Rpa          | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Tolentino Rommel M Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Deserre Steven Francis Cnm   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Gold Eric W Rpa              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Hunter Lauren A Rpa          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Hettrich Amy L Rpa           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Carsillo Vincent James Ii Do | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Tedesco Karen Lynn Md        | All Other         | ✓     |         |       |         |       |       |        |       |         |       | ✓      |
| Dicerbo Nancy                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mortazavi Shervin Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Vascular Group Pllc          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Li Eric                      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Dicaprio Matthew R Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Schneider Jennifer L Rpa     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Capital Cardiology Assoc Pc  | All Other         | ✓     |         |       |         |       |       |        | ✓     |         | ✓     | ✓      |
| Dejesus Maria Arsyl Dulay Md | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Wood Bret James Do           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Makavana Jayeshkumar J Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Kearney Andrew S Rpa         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Aragona Sharon L             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |



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Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects  |                   |       |         |       |         |       |       |        |       |         |       |        |  |
|----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Stoecklin William          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Murray Amy J               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Churchill Laura Hutchins   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Bredwood Jacqueline E      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Brady Helen H              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Yadegari-Lewis Nasrene Md  | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Haldeman Iii Richard J     | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Brown Alice D              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Breen Martin Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schottler-Thal Carrin Md   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lobo Melvyn Albert Md      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Glick Cheryl M             | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Dawson Schuylar C          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Marici Kathleen Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Oechsner Helena Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Bonanno Joseph Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Berger Sondra Kristen Dpm  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Di Lullo Joseph Matthew Md | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Murray Sherrie L           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Gregg Michael              | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Bogdanov Assen Petrov Md   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Braga Eileen               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Brady Ann Theresa          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kim Regina Y Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Spear Alison Heather Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Cleveland Byrd Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Long Heather Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Daoui Rachid               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Young Pamela Y Rpa         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Russo Thomas               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Naumowicz Edward T         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |



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|---------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Jones David M             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gurrala Geetha Md         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Cleney Holly K Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Baker Judith A            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Collea Rufus Patrick Md   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Raja Asim Nazir Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Byrne William Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Liebers Edward Martin Md  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Englander Meridith J Md   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Valerian Brian Thomas Md  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Miller Marilyn            | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |  |
| Kondo Kathleen            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Flik Anna Grattan Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Limes Britton J Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Paul Arlette Mary         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Ford David L Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lu Ping Md                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Detommasi Allison Rose Md | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Gill Zaheer Ashraf Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Chang Andrew Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Samson Susan Marie        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Maxwell Steven J Do       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mustafa Marianne A Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schongar Marie Antoinette | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Malin Julia Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Meyer Vincent Edwin Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Dedona Andrea M           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Phelan Carol Beberwyk     | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       |       |        |  |
| Belova Natalya Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Nicholson Timothy Joseph  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Ralph Walter M Jr Md      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |



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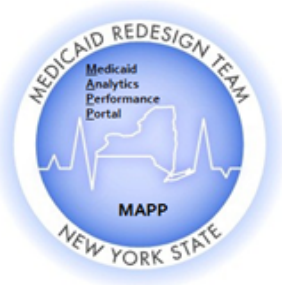
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|---------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name             | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Sugent-Gray Linda J       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dluge-Aungst Dawn B Rpa   | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hyland Maureen Annette    | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Trapp Joseph J            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sgarlata Donna L          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Shafer Carolyn H          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Roske Julia H Rpa         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Wiest Daniel R Rpa        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ochal Michelle            | All Other         | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Rodrigue Raymond A Rpa    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| O'Brien Michael F         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Diaz-Parker Carl E        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Enzien Ernest M Jr Md     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Albany Med Ctr Hospital   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Erikh Tamara Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Case Christopher John Md  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Yamin Mary Christine      | All Other         | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |
| Warner Deborah P          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Santoro Eileen            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rendich Kathleen          | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rabbin Linda S            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Olszewski Peter           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| O'Loughlin Suzanne        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Morse Joyce               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Matties Regina K          | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Marsh Catherine Louise    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Janowski Darcy A          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Griffin Margaret Anne     | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Gabriel Nancy             | All Other         | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Flax Harold               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dahl Jeanne A             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |





New York State Department Of Health  
 Delivery System Reform Incentive Payment Project

DSRIP Implementation Plan Project

Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects        |                   |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
|----------------------------------|-------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| Provider Name                    | Provider Category | 2.a.i                               | 2.a.iii                             | 2.a.v                               | 2.b.iii                             | 2.d.i                               | 3.a.i                               | 3.a.ii                              | 3.b.i                               | 3.d.iii                             | 4.b.i                               | 4.b.ii                              |  |
| Chank Shelly M                   | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Gara Maureen                     | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Kaplan Eugene Daniel Md          | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Offord Stephen Robert Md         | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |  |
| Chen Wei Yu Md                   | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Cahill Ryan M Do                 | All Other         |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Bagchi Kaushik Md                | All Other         |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Hyde Natalie Ann                 | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Borden Eric Charles Md           | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Price Marc David Md              | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Boulos Alan Samuel Md            | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Rodriguez-Goodemot Renee B Md    | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Hirt Deborah                     | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Hechanova Arnel B Md             | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Falk Naomi S Md                  | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Green County Mental Hlth Mh      | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Jones Stephen Paul               | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Carrasco Andrea Y Md             | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Bayoumy Sayed Mahmoud Md         | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Navarro Brian Scott Md           | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Pani Saroj Md                    | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Hassett Stephen G Md             | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| McGovern Christine Elizabeth Rpa | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Siebeneck Aaron J Dpm            | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Prasad Manju Md                  | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Barba Anne Lauren Phd            | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Murray Brian P                   | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Field William Edward Ii Md       | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Catania Lucien D Md              | All Other         | <input checked="" type="checkbox"/> |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |                                     |  |
| Assevero Anna-Maria D Md         | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |
| Giramonti Karla Michelle         | All Other         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  |



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| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |  |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Chan Cindy Hoying Md          | All Other         | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Senior Hope Counseling Inc    | All Other         | ☑     |         | ☑     |         |       | ☑     |        |       |         |       |        |  |
| Whyte Mary C Md               | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Nysarc Dutchess Cnty Chap Spt | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Nysarc Dutchess Cnty Spv      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Wood Colleen T Np             | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Chakraborty Ranen Kumar Md    | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Pauze Denis Robert            | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Dittes Paul                   | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Getzke Nancy L Np             | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Albright Lauren Ann           | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Wohlfahrt Kristine Marie      | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Fabre Lynn D                  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Santoro Carol Rinko Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Seaman Tami Md                | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Center F/Disab Svcs Spv       | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     |         | ☑     | ☑      |  |
| Multi County Cdc Spt          | All Other         | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Multi County Cdc Spv          | All Other         | ☑     |         |       |         |       |       |        |       |         |       |        |  |
| Greenblatt Michael J Md       | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Living Resources Corp Spt     | All Other         | ☑     |         |       | ☑       |       |       |        | ☑     | ☑       | ☑     | ☑      |  |
| Living Resources Corp Spv     | All Other         | ☑     |         |       | ☑       |       |       |        | ☑     | ☑       | ☑     | ☑      |  |
| Tobolsky Shimon Rpa           | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |
| Lopez Janeen Ellen            | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     |        | ☑     | ☑       | ☑     | ☑      |  |
| Kasarda Karen Marie Rpa       | All Other         | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Larner Virginia Blake Rpa     | All Other         | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Catholic Charities Dds Spv    | All Other         | ☑     | ☑       | ☑     | ☑       | ☑     | ☑     | ☑      |       |         | ☑     | ☑      |  |
| Maheshwari Anil               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Knapp Robin Gail Cnm          | All Other         | ☑     |         |       |         | ☑     | ☑     |        | ☑     |         | ☑     | ☑      |  |
| Basavaraju Nerlige G          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Denovio Bradley M Rpac        | All Other         | ☑     |         |       |         | ☑     | ☑     | ☑      |       | ☑       | ☑     | ☑      |  |
| Marsh Patricia L Rpa          | All Other         | ☑     | ☑       |       | ☑       | ☑     | ☑     | ☑      | ☑     | ☑       | ☑     | ☑      |  |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Campbell Kathleen Kissane Rpa | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Mcgarry Karen A Rpa           | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Catholic Char Dds Hcbs 15     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Emmons George Dpm             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Petraccione Lisa F Rpa        | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| May Doreen T Rpa              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Braden Diane Beers            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lingat Marie Cheryle P Md     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Living Resources Corp Hcbs 6  | All Other         | ✓     |         |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |  |
| Matthews Elizabeth Susan      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Braungart Carol Fritz         | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Goldberg Barry Stuart Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Stein Rhonda Danielle Md      | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Center F/Disab Svcs Hcbs 12   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Torosoff Mikhail T Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hopkins Patricia M Md         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mandato Kenneth Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Ens Health Care Services Llc  | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Natalenko Irina Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dempsey Stephen J Md          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Eaton Carolyn A Md            | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Giantinoto Salvatore J Do     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Meltz Theresa Ann Rpac        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Muller Susan Marie Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dooley Kevin M Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Puthuparampil Beulah J Md     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Brennan-Jordan Nancy          | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Espey Kathleen Ann            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Conway Lillian Marie          | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Jorgensen Shawn P Md          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pierce Jean Catherine Rpa     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



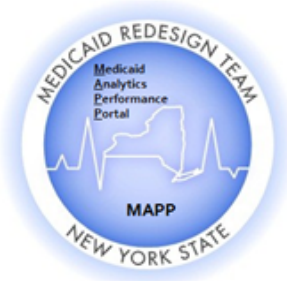
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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Gradner Jill A Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pribis Anneke B Md            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Char Dds Hcbs 14     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Capitalcare Medical Group Llc | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Spektor Boris Md              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Di Preta John A Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dailey Michael Winter Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mian Badar Munir Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Hutton Jennifer Dpm           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Living Resources Hm Care Ag   | All Other         | ✓     |         |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |  |
| Wilkins Lance Julius Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gateway Comm Industries Smp   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Center F/Disab Svcs Semp      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| The Workshop Inc Smp          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Warren Washington Arc Smp     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Living Resources Corp Smp     | All Other         | ✓     |         |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |  |
| Nysarc Inc Dutchess Cnty Smp  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mcgork James Rpa              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lemons Lorraine S Do          | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Hochster Howard James Md      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Asher Shellie Lynn Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wise Birute Marija Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mehta Manish Md               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Carrelle Raymond J Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Bauer William M Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wayne Joseph T Md             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mouzakes Jason Md             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ens Hlth Care Mgmt Llc        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Shur Irina N Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Doyle Todd Harrison Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Pelnik-Fecko Tricia Ann Md    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



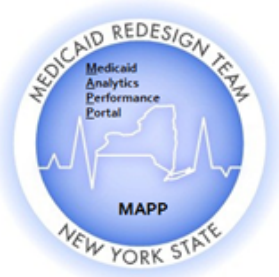
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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Wingate At Beacon             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Karatnycky Adrian Paul Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Belvedere Enterprises Llc Tbi | All Other         | ▼     | ▼       |       |         |       | ▼     |        |       |         |       |        |
| Pope Ronald James Do          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Curtin William Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Silver George E Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Santoro Ian Hebbard Md        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hunter Philip Raymond Md      | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Price Darin Michael Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Catholic Char Dds Hcbs 13     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Shulof Jennifer Amy           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Saqib Najmus Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Andrejuk Tomasz Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Domnich Ilya Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Palmieri Suzanne Do           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Living Resources Corp Hcbs 5  | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Ehlers Melissa Anne Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Goslin Robert H Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Ozsvath Kathleen Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Thompson Dan Ralph Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Cardiel Alexander Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sama Jalin Md                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dawodu Segun Toyin            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Johnson Charles A Do          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hinerman Rachel Sue Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| James Philip C Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Pasha Muhammad Asghar Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Aitken Geri Lynn Do           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Pyle Bert William Iii Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mckenna Dennis Patrick Md     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sherwood David Edward Md      | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       |       |        |



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| Zhou Peipei Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Gupta Saaket Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Richter Seth Joseph Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jorgensen Stephanie E Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Papaleo Rafael Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mconnell Theresa Marie        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Romero Jenny Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fear Philip J Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Living Res Certified Hha      | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Poli Kim Ann Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Laddis Theodoros Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ricker Kerry Elizabeth Do     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ongchai Benson Go Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Mitchell Nancy Lynn           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Norton Mary Alice             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Prime Donna Rpa               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Crnkovic Anica Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ehlers Mary Ellen Md          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Tonneau Benoit Md             | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Mead Daniel H Pa              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Morelli Amy M Rpa             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Brueggemann Christina Mchugh  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Flood Christopher Daniel Md   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Cah Center For Disabled       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| St Peters Licensed Home Care  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Ceballos Jeanne Forziat       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dirisio Darryl John Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Duthaler Todd Douglass Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jacobson Kirsten Elizabeth Md | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Macdermott Richard Pratt Md   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Zimring Debra Carol Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |



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| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Das Shankar Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bown Melissa Ann              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Sternbach Yaron Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Roddy Sean Peter Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Slatch Carolyn Jean Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Comber Paul Gerald Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Munshi Upender Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gaston Shenelle R Md          | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Boulos Maria Theresa Bajas Md | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Carillon Nrs Rehab Ctr Adhc   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Gleason Mary Kathryn          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Funk Deborah Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mcpadden Marion C Cnm         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bell Joseph William           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Phelan John Thomas Ii         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Brasch Robert C Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Murphy Kathleen A Cnm         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ng Bernard                    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Howard Elizabeth A Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shetty Tharun                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Evans Stephanie B Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Nardacci Elizabeth Anne       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wurl Derrick R Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chase Michael P Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Palmieri Philip J Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Venditti Ferdinand Joseph Jr  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tietjen John Charles Jr       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Dunn Elizabeth Mary           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Sahgal Sumir P Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Reed-Esper Sarah Nicole       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Murphy Christine M Md         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |



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| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Albany Med College Radiology  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Deporto Robert Do             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Jafri Mokarram H Jr Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ten Broeck Commons Adhc       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Shapiro Mikhail Do            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dunne Christa Md              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Smith Peter Dpm               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Jorgensen Todd Robert Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lundberg Lori A Dpm           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bulford Lionel A Dds          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pintauro Robert               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Lindman Harry David Md        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Qian Jiang Md                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gomez-Di Cesare Caroline M Md | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Consumer Directed Choices Inc | All Other         | ✓     |         | ✓     |         |       |       |        |       |         |       |        |  |
| Lahut Barbara K               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kelleher Ruth Ellen           | All Other         | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       | ✓     |        |  |
| Jacob Rana B Md               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Dawkins Earl Anthony Rpa      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Maitland Ceceleta Y Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Stam Katherine L Do           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Marici Edward M Do            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lau Kevin Md                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kudria Inna Md                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hanley Audra J Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Foyt David Md                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Listman James A Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gandham Vijaya L Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| White Mark Donald Md          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Wu Nini Choun-Yi Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Zackon Ira L Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |





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| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Galati Lisa T Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Baker Kenneth J Md           | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| D Robbins Podiatry Pc        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Saluja Ravinder Kaur Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ross Donald Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Levine Carolyn Robbins       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Drzymalski Zofia Wanda Md    | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Murphy William Patrick Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Alarcon Gabriel Baldomero Md | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Wright Stuart B Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kumar Raman Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Goldenberg Kelly A Cnm       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Litynski James               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Hajar Marilyn                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Shah Parag S Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Donohue Robert               | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Morris Robert Scott          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Benton Robert E Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Bala Virinchi                | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Merriman Joann               | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Ogbuji Princewill O Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Buhac John Md                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Folger Walter H Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Hogan-Moulton Amy E Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Nussbaum Jack Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Gebhard Paul E Jr Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Block-Galarza Jessie A Md    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Dexter Scott C Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| O'Brien James Joseph Md      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Lenefsky Ronald I Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Czerwinski Maria H Md        | All Other         | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |  |



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|------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Buhlinger Christine A Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Towner Robert A Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Monzur Mohammed Ali Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| New York Oncology Hematology | All Other         | ▼     |         |       |         |       |       |        |       |         |       | ▼      |  |
| Foster David E               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Daley Lisa M Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Living Resource Corp Tbi     | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Resta Regina Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kolodziej Michael A Md       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Watsky Jay G Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Eldeiry Samer S Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ramani Ananthakrishnan Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Goyer Richard Paul Jr Md     | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Dearth Christine Cillis Md   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kamenir Steven A Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kondo Nicholas Ivan          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Cohen Aaron Howard Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Beegle Scott H Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Patel Mahendra Ambalal Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kamath Sachin Narsinha Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| O'Brien Joanne Elizabeth     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Graney Sheela Md             | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       |       |        |  |
| Rosales Manuel Ramos Md      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Baldini Gleda P Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Azad Abul Kazam Md           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Damore Dorothy Taylor        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shapiro Fred Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Paeglow Robert John Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Kogan Barry Allan Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Sai B Gandham Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Caracandas John E Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Cirenza Emanuel Nicholas Md   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Ares Carlos Alfredo Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Napoli Michael A Dpm          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Schneider James Michael Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Reider Jacob Michael Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Santella Donald Richard Md    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kaufman Lawrence S Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Nysarc Dutchess County Hcbs 2 | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Wingate Of Ulster             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Greenspan James Scott Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chowdary Sunita Kollu Md      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Allard Ingrid M Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Diaz Alan                     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Taccad-Reyes Sandra Carlos Md | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Gordon Peter Eliot Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Birnbaum Eliot L              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Scialdone Claude Joseph Md    | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Celestin Jocelyn Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kiehl Anita Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Albany Medical College        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Taneja Sanjay Md              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Brennan Tracey Lynn Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sagar Sushil Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Chang Theodore Tuan Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Visiting Nurse Assoc          | All Other         | ✓     | ✓       |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |  |
| Tietgens Sharon T Md          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Parikh Nita S                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Nazeer Tipu                   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Krizar Stephen Lewis Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jennings Timothy A            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gerety Gregg F Md             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Carlson John A Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Boguniewicz Anna B            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Bakst Gary Md                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Empire Home Infusion Svc Inc  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Ali Shehzad                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Brasch Mary L Md              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Thibodeau Lorraine G Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Merkhan Samuel Kabriyel Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Herr Allen Michael Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Velvis Harmannus Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hawthorne Jami M              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Tai Muhammad Siddique Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kirkpatrick Douglas Peter     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Schynoll Gerald Klaus Md      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Millett Jeanne Marie          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mane Archana Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Diaz Miguel Remigio Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Sirico Theresa A Do           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Cheney Robert Alan Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Cotugno Steffani Do           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Chava Prabhakar Rao Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Shustarovich Alla Md Pc       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kufs William Michael Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kimble David Michael Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Diana Mary G Md               | All Other         | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |  |
| Roche Sean Patrick Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Chernoff Daniel Michael Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Livshits Aleksandr Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mendola Antony J Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Gupta Vinita Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|-----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Desemone James Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kanwar Vikramjit S Md       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Lechowicz Andrzej Jan Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Alagna Paul G Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Salenger Page Valery Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Qualtere-Burcher Paul D Md  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Morawski John L Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Hoffert Eugene Joseph Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Kreienberg Paul Boyd Md     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Wingate At Dutchess Inc     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Signor Connie J             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Baghel Ashok Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Cosgrove Ellen F Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Wymer James P Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Ribons Lisa Ann Do          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Contractor Salim G Md       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Siskin Gary P Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Holcomb Alvin D Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Yousuf Asim Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Jameson Gerardus L Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gupta Vinod Kumar Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Any-Time Home Care Inc Tbi  | All Other         | ▼     |         |       | ▼       | ▼     |       |        | ▼     |         |       |        |  |
| Lucas Judith Anne Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kanaan Camille M Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Deblock Heidi Frutchy Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Benoit Marcel M Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Cutler Amos B Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Zabinski-Kramer Kathleen Md | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Moore Susan Elaine Md       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Tallman Mark Patrick        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dexter Martha Evelyn        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Syed Zainul-Abideen Md        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Sipperly Stephen F Do         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Lee Edward Choongho Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Oconnor William Walter Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mitkoff Nathan B Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Schenectady Co Chap Nys Arc   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Astor Home For Children Fbt   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| St Catherines Ctr/Child Fbt   | All Other         | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Senick Joyce M                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mongiovi Russell J            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Volfinzon Leonid Medical Pc   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Downey Kathleen Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Jacobs Hugh Frederic Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chaudhry Sanjay Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mifsud Mindy                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Catholic Charities Tbi        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Robertson Richard C           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Seton Health System           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Samuels Sharon B Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bock Katja Elizabeth Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mccullough Andrew Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Weaver Susan Adele Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Riddick Linda M Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Spirig Andreas M Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Mason Appleton Adams Iii      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hospodar Paul Peter Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Child & Fam Guid Ctr Adict Sv | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Woods Margaret Mary Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Kuhar Gordon N Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mckeeon Elisabeth Waterman Md | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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| Provider Name                | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Sonn James Jin Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bevilacqua Lisa Rose Md      | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Ortiz Gordon Michael Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Millar Robert David Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sanders Alan M Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Alley R Maxwell Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Schumacher Thomas C Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sacco Joseph P Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Stern Jeffrey H Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hoover Eric Md               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mastrianni David M Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Liporace Ralph L Md          | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Landy Robert Jay Dpm         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Paty Philip S K              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Lee Josephine M Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Simon Elisabeth              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Michailides-Townsend Sally M | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ianniello Louis Md           | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Fusella Joseph Ii Do         | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Gaylord James Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kredentser Daniel C Md       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Chu Alan L Md                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Costello Kevin B Md          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fish Douglas G Md            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kelty Robert Walter Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| O'Leary Anthony M Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Yee Lily Fong Cho Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Lasalle School Inc           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Furst Branko Md              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Justa Shelley Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Gibbons Susan K Md           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |



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|----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                    | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Moran Antoinette Collins Rpac    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Vinh Phuong Md                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Melamed Daniel E Md Pc           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Conifer Park                     | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |  |
| Hellman Lance I Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Boenau Iolienne Beth Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pinto Gregory L Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Kircher Mark Taylor Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Kesner Rubin Do                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Porter Joanne C Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Higgins Elizabeth A Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Mitchell I Weinstein Do Pc       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Davison Edwin Allen Jr Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lee Arthur Farren Md Pc          | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Gujral Maninder S Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Fishel Stephen C Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pezzulo John Phillip Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schnakenberg Eric C Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Knapp George Sterling Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Thorn Lisa Marie Md              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Cohoes City School District      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Card Harold George Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schaffer Hal K E Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Jones Richard Eaton Dpm          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Salama Meir Md                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Pike Denning Vanessa L Md        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Yocono Mark A Md                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Demarco Linda C Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Morris Barbara A Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Whittier Rehab & Skilled Nrs Ctr | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Viola Theresa Md                 | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |





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| Provider Name                  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| King Charles Christopher Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Esper Daniel William Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Knoeller Amy Eileen Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Accent Health Care Services    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Berkowitz Richard              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lackey Mary Michele            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Luidens Mary K Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Morley John N Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Accent Health Care Svcs Inc    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Daly Pamela Lynn Dpm           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Balot Barry Hal Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Verra Mark A Md                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Patel Nileshkumar Gokal Md     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dweck Laurie Jo                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Spingarn David H Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Desai Nimesh Shashikant Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shaker Pediatrics Pc C         | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       |       |        |  |
| Glaser Lewis A Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mchugh Brian Anthony Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Starnes Hal Fletcher Jr Md     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Merecki Eugene Karl Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Larosa Joseph M Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Lemanski Paul Md               | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Hope House, Inc.               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Triner Wayne R Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Bellin Joyce Lea Pa            | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Thomas Christopher W Md        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Living Resources Corp. Dyckman | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Militar Epifanio Iguidez Md    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Bedford Sharon L Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Bruce Victor G                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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| Provider Name               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Pascual Arsenio George Md   | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Nijjar Gurkirpal S Md       | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |  |
| Kaufman Ronald P Jr Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Bartholomew Catherine R Md  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Miller Cynthia H Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Leinung Matthew C Md        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Arnold Hendrick Jr Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Weiss Robin                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dort Janice Beth            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Romer Richard Alan Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Andriakos Peter George Md   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Python John Patrick Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Galati James Edward Dds     | All Other         | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Jacobson Sig-Linda Md       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Warszawa-Ambros Maryla A Md | All Other         | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Schick Karen Wynne Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Cole Peter Ramon Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Skory David S Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Quinn David Edwin Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Morin Michael P Md          | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Willen Michael A Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Cavaliere Ludovico F R Md   | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Anand Vinod Md              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Byrt William T Md           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Delago Augustin J Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kuettel Thomas J Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Flatau Irene Ruth Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Golden Owen Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Nielson Robert P Jr Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Fuhrman Solomon M Md        | All Other         | ✓     |         |       |         |       | ✓     |        |       |         |       |        |  |
| Argoff Charles E Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



**New York State Department Of Health  
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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |  |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Cerda Jorge Md                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schwartz Kenneth Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Darling Ralph C Iii Md        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Frank Alex Harris Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Smith Vivienne E Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mathews John Francis Md       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Mirza Shahida Parveen Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Haber Eugene Curtis Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Wilbourn Shelby L Md          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Gilroy Shelley Ann Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Devereux Fnd Richmond Icf     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Devereux Fnd Wittenberg Icf   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Living Res Corp Cardinal Ave  | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Camp Rodney L Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schenectady County Pub Hlth   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Kandath David D Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Schenectady Cnty Public Hlth  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Salehi Freshteh Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Saunders Richard A Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Khullar Anil Kumar Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Amin Hiral Natwarlal Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Dubin Andrew Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Bartfield Joel M Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Dudek Joseph J Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Wellington | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |



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|-----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Samelson Renee Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Herman David L Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Uhl Richard L Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Dorsey Susan Serra Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Marthy-Noonan Anne K Md     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Bernstein Michael Paul Md   | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Hosannah Hilton O li Md     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Hedderman Robert Joseph Md  | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Ross Jeffrey S Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Rienzi Peter Anthony Md     | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      | ✓ |
| Coombs Kenneth E Dpm        | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Roberts Maureen E Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Esposito Russell J Do       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Miller Stuart J Jr Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Dufresne W J Duke Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Orchard Nursing & Rehab Ctr | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Philbin Edward F Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Hughes Cindy Weiss Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Beer Paul Marius Md         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Sandison Michael RI Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Schumacher Cajsja J Md      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Quarrier John V Md          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Ray David Allan Md          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Yan Richard                 | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      | ✓ |
| Kronick Gary Archer Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Duff Thomas Edward Jr Md    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Wong Winston C Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Kineke Stephen Francis Md   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Davis George Fabyan Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Talma Theodore E Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Gudesblatt Mark Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |



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|--------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Sarchino William J Dpm         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Spinelli Karen Ann Md          | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Conti David J Md               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Robinson Lawrence W Jr Md      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ferndcliff Nursing Hm Non Occ  | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Any-Time Home Care Inc         | All Other         | ✓     |         |       | ✓       | ✓     |       |        | ✓     |         |       |        |
| Tobin Ellis H Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Devine Maria Kansas            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Macina Andrew Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Alderisio William George Md    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Goldstein Elsa Teresa Md       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Brooks Timothy Alan Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| 820 River Street Inc.          | All Other         | ✓     |         |       |         |       | ✓     | ✓      |       |         | ✓     | ✓      |
| Valentine Elizabeth A Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Alfred Richard H Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Visiting Nurses Homecare       | All Other         | ✓     | ✓       |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |
| Marinello Anthony James Md     | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Tetreault William Robert Md    | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Lecours Laura Yates Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Constantino Jorge Lucas Md     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Adsit Mark G Md                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fritz Howard Philip Jr Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gerber Allen Md                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Schenectady Family Health Ser  | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Living Resources Corp. Hays    | All Other         | ✓     |         |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |
| Daughters Of Sarah Non Occ     | All Other         | ✓     |         | ✓     |         |       |       |        |       |         |       |        |
| Furci Thomas James Dpm         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Putman William Erskine M Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Kennedy Thomas M Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Buff Christopher Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Living Resources Corp. Dowling | All Other         | ✓     |         |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |



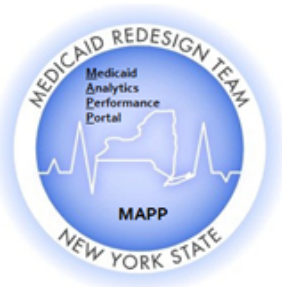
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|----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                    | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Atalay Hasan Nail Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Scroggins Sandra Rae Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Manjunath Kallanna Md            | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Socariss Sophia Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hollowell Jean Gaye Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Clinton Henry Louis Jr Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lafleur Carolyn Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Karo Ronald Solomon Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Campito Mitchel A Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Palat David S Md                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Albany Medical College Of Uni    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Morere Donald R Jr Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Gupta Sindhu Md Pc               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Burchell Randall Lawrence Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lamparello Peter X Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Subudhi Manoj Kumar Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mcerlean Mara Ann Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Kumar Arbind Md                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Snyder Howard Md                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Buff Daniel David Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Boxt Lawrence M Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Living Resources Corp. Jefferson | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Cagino Anthony John Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Living Res Corp Balltown Icf     | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Vachon Francois Marc Andre Md    | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Scialabba Fred P Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Living Res Corp Schodack Icf     | All Other         | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Fein Lawrence Md                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Papandrea Louis M Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Johnston Mary Md                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Elmendorf Sarah Louise Md        | All Other         |       |         |       |         |       |       |        |       |         |       |        |



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|------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name                      | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Kaaterskill Care Skilled Nrs & Reh | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Kaslovsky Robert A Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Smith Thomas Clinton Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Condy Angela G Md                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Catholic Charities Warren Icf      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Basile Dominick Md                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Boyar George Md                    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Pride Boone Janice Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      | ▼ |
| Addictions Care Ctr Of Albany      | All Other         | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Fuchs Marc D Md                    | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Whipple Richard Raybold Md         | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Tristram Debra A Md                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Walker Michael Francis Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Chang Benjamin B Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Kao Wei Md                         | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Rosen Jonathan M Md                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Stevens Arthur L Md                | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      | ▼ |
| Halbig Robert Joseph Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Albany Medical College Of Uni      | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Malamood Howard Md                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Sacco Joseph D Md                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Paul Jeffrey Thomas Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Britton Lewis W Iii Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Any-Time Home Care Inc             | All Other         | ▼     |         |       | ▼       | ▼     |       |        | ▼     |         |       |        |   |
| Wagle William Md                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      | ▼ |
| Hughes Peter M Md                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Chalmers Paul Md                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Pearlstein Gary E Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Maben Wayne Charles Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Blass Joel Mitchell Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Gelman Leonard M Md                | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |   |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

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**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |  |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Carl Allen L Md               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Posada Jose Gonzalez Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Neilley Henry Md              | All Other         | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| Phillips Roland Turner Md     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Daggett Brian George Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sacolick Benzion Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Finn Daniel Joseph Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Goldberg Steven Marc Md       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Community Hospice Inc         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Pearce Jennifer M Md          | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Baillargeon Neal Arthur Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Snitkoff Louis Md             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Puranik Arun Md               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mitnick Neil Craig Md         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Bentrovato Donald A Md        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Semenoff David L Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Horn James F Md               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Caulfield Patrick Francis Md  | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Barnert David M Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Eisele George Md              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Home For Aged Blind Adhc/Aadc | All Other         | ✓     |         | ✓     |         |       |       |        |       |         |       |        |  |
| Edge Walter E li Md           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Czajka Ellen M Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Digiovanni Louis A Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jaffe Joshua Md               | All Other         | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |
| Eddy Vna Twin Counties        | All Other         | ✓     |         |       |         |       |       | ✓      |       |         | ✓     | ✓      |  |
| Tyler Ira M Md                | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Sorum Paul C Md               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Michalek Ann V Md             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Schnide Kenneth Ben Md        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chen Ying-Jen Md              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |





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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Pagnotta Inez Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Grant Stephen A Md            | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Bloomfield Naomi Terry Md     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rosenberger John Daniel Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Com Hlth Ctr Of Smh & Nlh Lth | All Other         | ▼     | ▼       |       | ▼       | ▼     |       |        |       | ▼       | ▼     | ▼      |
| East Neck Nursing & Rehab Ctr | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Caramore William J Md         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Zuravicky Igal Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Com Hlth Ctr Of Smh & Nlh Inc | All Other         | ▼     | ▼       |       | ▼       | ▼     |       |        |       | ▼       | ▼     | ▼      |
| Voleti Venkateswararao Md     | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Gill Tarig N Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Parikh Shirish Jayant Md      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Community Care Physicians Pc  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Atkins Carl D Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Orsi Richard A Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ulster-Greene Arc Palmer Icf  | All Other         | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Elacqua Mary S                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Khan Noor Zaman Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Lang Christine M Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Busch Robert Steven Md        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Goodman Thomas L Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Calamia Vincent Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Phelps Carlton Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Catholic Charities Serena Icf | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Patterson Norman W Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Bannon John David Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Sonnekalb Michael P Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Kolber Bryan R Dpm            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Hoy Christopher Dion Md       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Eames Frederick Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Conlon Alan T Md              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |



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|--------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name                  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Vinciguerra Timothy J Pc Md    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Donovan Glenn J Dpm            | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Starkman Marjorie E Md         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Putnam David L Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Litwa Wallin J Do              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Bennett Edward V Jr Md         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Washington Ronald A Dpm        | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Horgan Michael Joseph Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Monkash Jeff Ira Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Lieberman Ruth L Md            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Wolfson Mitchell Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Sullivan Andrew Md             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Weissbart Clyde H Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Garbo Lawrence E Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Baran Andrij Ostap Dimitry Md  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Lefkovits Andrew Md            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Nolan Florence A Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Vna Albany Saratoga Rensselaer | All Other         | ✓     | ✓       |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Francomano Thomas John Md      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Twin Cty Recovery Svcs Inc     | All Other         | ✓     |         |       |         |       |       | ✓      |       |         | ✓     | ✓      | ✓ |
| Semlear Robert Dwight Md       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Cioffi James Michael Md        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Hendrick William Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Goddard Bryan L Md             | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      | ✓ |
| Weissberg Robert A Md          | All Other         | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      | ✓ |
| Musto Ronald V Md              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      | ✓ |
| Scotti Lorenzo Louis Dpm       | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Pozniakas James T Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      | ✓ |
| Haqqie Syed S Md               | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |   |
| Czajka John Md                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |
| Caldwell Samuel Smith Md       | All Other         |       |         |       |         |       |       |        |       |         |       |        |   |



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|------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                      | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Bruce Melody A Md                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rizzo Vito Joseph Dpm              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Weinberg Gerard Md                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Visiting Nurs Svc/Schtd & Sar Cnty | All Other         | ▼     | ▼       |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Mchesney James D Md                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Beer Ruth Md                       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Dinovis James Paul Dpm             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Collens Richard Md                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rios Zandra M Md                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Phelps David Millard Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Kolanchick Gary J Md               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Siniapkin George C Md              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Nebres Jose F Md                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Balter Richard R Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Shapiro Lee S Md                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Schoenfeld Barton Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hauer David I Md                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Depaul Addiction Services Inc      | All Other         | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Betzhold James John Md             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tomiak Henry P Jr Md               | All Other         | ▼     |         |       | ▼       | ▼     | ▼     | ▼      |       | ▼       | ▼     |        |
| Rauch Alan Edward Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Ostrov Arthur H Md                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Henry Clarence Bruce Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Marshall Robert Andrew Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Silk Paul R Md                     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ells Peter Francis Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fein Steven Md                     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Saratoga Cnty Comm Srvs Brd        | All Other         | ▼     |         |       |         | ▼     |       | ▼      |       |         | ▼     | ▼      |
| Greene Elliott Stephen Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Perl Lawrence Mark Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Wolff Michael Leonard Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Bonura Frank Salvatore Md     | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Alegre Catalina               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Strader Stephen Earl Md       | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Herlihy Kevin J Md Pc         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Alcoholism Council Schen Cnty | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Jacobs Fred I Dpm             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Busino William A Jr Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Purcell Peter F Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lozman Jeffrey Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Capital Region Orth Assoc Pc  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Saperstone James D Md         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Ford Bradley A Md             | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Fusco Joseph J Md             | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Bakhru Usha H Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shah Dhiraj M Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Patel Vina R Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Pietrocola Donna M Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Packard R Andrew Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Capalbo Ralph H               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Baselice Marino Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Albany Cnty Community Svc Bd  | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       |         | ▼     |        |
| Fruiterman Roy Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Patil Nagaraja N Md           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Glasgow Constance Lenore Mdpc | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Irwin Robert W Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Clark David A Md              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Woods Norbert J Md            | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Walders James D Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Zeltner Theodore Harold Md    | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Silver Steven M Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ismail Mohammed Md            | All Other         | ▼     |         |       |         |       | ▼     |        |       |         |       |        |



**New York State Department Of Health  
Delivery System Reform Incentive Payment Project**

**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Agopovich Arsenio Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Pinheiro Steven Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Browne William F Md           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Waldman John B Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mika Philip J Md              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Nepo Anne G Md                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Jain Rajinder Md              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Harde Hasmmukh C Md           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Capital District Ped Card     | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Toussaint Jon T Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Roberts Kevin Wilson Md       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mitta Swatantra K Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Toll Richard B Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chin Yin Lee Md               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bello Scott C Md              | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Miller Nelson L Md            | All Other         | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |
| Gay Royal Md                  | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Van Rensselaer Manor Snf      | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Vna Of Albany & Saratoga      | All Other         | ▼     | ▼       |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Planned Pthd Mohawk Hudson    | All Other         | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |
| Albany County Health Dept     | All Other         | ▼     |         |       |         | ▼     |       |        | ▼     | ▼       |       |        |
| Ucp Assn Of The Capital Dist  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Whitney M Young Health Center | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Columbia Cy Dept Of Health    | All Other         | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Greene Cy Public Hlth Nursing | All Other         | ▼     |         |       |         | ▼     |       |        |       |         | ▼     | ▼      |
| Greene Cnty Pub Hlth Nurs Ser | All Other         | ▼     |         |       |         | ▼     |       |        |       |         | ▼     | ▼      |
| Columbia Cnty Health Dept     | All Other         | ▼     |         |       |         | ▼     |       |        |       |         |       |        |
| Quinn Brian O Malley Pc Md    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Trickey David L Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Albany Medical College Of Uni | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fruiterman Mark L Md          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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**DSRIP Implementation Plan Project**

**Albany Medical Center Hospital (PPS ID:1)**

\* Safety Net Providers in Green

| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Bertram Michael C Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Kamath Marian D Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Lee Joong Md                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rosenberg Stuart A Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Kosinski Norbert Dpm          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Finger W Edward Jr Dpm        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Khoury Nidal Y Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Madeb Isaac Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Jolly George A Md             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Petersen William A Md         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Malone Anthony F Md           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Silvers Stewart A Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Richman Charles H Md          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Fisher Hugh A G Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rivard Donald J Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Hillinger Stephen Md Md       | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Parnes Steven M Md            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Macdowell Richard Taylor Md   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shamoun Jack Elie Md          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Spooner Eric W Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Leyhane James C Md            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Boczko Stanley H Md           | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Millora Angel B Md            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Lasky Charles W Md            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| The Springs Nursing & Reh Ctr | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Stanton Nursing & Rehab Cente | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Lehine Guy Daniel Md Faap     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Greater Adirondack Home Aides | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Columbia Memorial Hospital    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Peninsula Gen Nursing Home    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Farrell Richard Md Jr         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



# New York State Department Of Health Delivery System Reform Incentive Payment Project

## DSRIP Implementation Plan Project

### Albany Medical Center Hospital (PPS ID:1)

\* Safety Net Providers in Green

| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gross Eric J Md               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Komanoff Ctr/Geriatric Rehab  | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Avenue Nursing & Rehab Ctr Sn | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| St Margarets Center           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Teresian House Nrsg Hm Co Inc | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Poughkeepsie Crossings        | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Catskill Crossings            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Evergreen Commons Snf         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Glens Falls Crossings         | All Other         | ▼     |         | ▼     |         |       |       |        |       |         |       |        |
| Mountain View Nrs & Reh Ctr   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Shore View Nursing Home       | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Morningside House Nursing Hom | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Albany County Nursing Home    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Dutchess Ctr Rehab Healthcare | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Sea-Crest Health Care Center  | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Saratoga Hospital             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Upper Hudson Planned Parent   | All Other         | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |
| Ford Jockular B Pc Md         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Belding Alfred Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Albany Medical Ctr Hospital   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Pp Of Mid-Hudson Valley Inc   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Tan Alfonso Md                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Owen Golden Md Pc             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Rodenmayer Wade Harold Rpa    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Martin Jill                   | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Mack Brigid                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Santos Roberto                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Any-Time Home Care Inc Nhtd   | All Other         | ▼     |         |       | ▼       | ▼     |       |        | ▼     |         |       |        |
| Marshall Ryan                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sheehan Rebecca               | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Culp Anita                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gabree Samara                       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Camillo Reginald Alivia Md          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Ens Health Care Management Llc Nhtd | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Rosenbaum Elena                     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Astorga Rakel Maria                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Dollard Michael Anthony             | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Peter Elliott Fisk                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Gardner Nathan James Rpa            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Van Meter Jr Charles                | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Monserrate Nicole Marie Md          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Norton Neal David Jr Rpa            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Birdsey Karen Diane                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Family And Child Services Schen Day | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Orlovskiy Aleksandr Md              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Saxena Amit K Md                    | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Phung Quentin Md                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| D'Arcy Allison T Rpa                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ampuero Juan                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kevin Jones                         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Vollmer Kelly J                     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| New York Pain Management Pllc       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Pettigrew-Duffield Pamela           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Kepner Heather Marie Np             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Wheeler Julie Ann Np                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fantauzzi John Patrick Md           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| George D Waterman Jr                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Jeannine Marie Rother               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wildwood Programs Inc Rec Rsp       | All Other         | ✓     |         |       | ✓       |       |       | ✓      |       | ✓       | ✓     | ✓      |
| Oretsky Dawn L                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Visiting Nurse Association Of Alban | All Other         | ✓     | ✓       |       | ✓       |       |       |        | ✓     | ✓       | ✓     | ✓      |
| Adamo Matthew Armand Md             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |





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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gerdeman Andrew Charles             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Mulligan Michael Thomas             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| De Waal Malefyt Stephen Karel Md    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Cirilla Dennis Jacob Ii Do          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ferrara Justin Michael              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Davidoff Sam Do                     | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Patel Umesh                         | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Miranda L Dunham Fnpc               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Daniela Iulia Sima                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Abigail R Watson                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Taylor Matthew Arnfin               | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Feygin Ruslan                       | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Shpitalnik Larisa                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Dorfman Annette                     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Visagie Anina Isabella              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Homan Suzanne Michelle              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Locke Elizabeth Anne Md             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ferrando-Dehtiar Natalia Victorovna | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Caesar Mimieux Vanetta              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Dalfino John Charles                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fitz Bronwyn                        | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Krishnakumar Dundappa Hongalgi Md   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Southworth Krista Rpa               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Chasin Zacharias                    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Blinkhorn Richard John Jr           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Emily Knuth                         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Fabian Thomas                       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Soryal George Fayk Melad            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Kane Tabitha                        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lubna Valliani                      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Tryon Crystal M                     | All Other         |       |         |       |         |       |       |        |       |         |       |        |



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|------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                      | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Simmons Richard J                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Barcomb Timothy F                  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| John Delmonte Jr                   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Seale-Simpson Marjorie Elizabeth   | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Hogan Eileen Fox                   | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Frawley Bridget Kathleen           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| White Bruce David                  | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Catholic Charities Of Albany Ptl   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Dennis J Basila                    | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Lyubarova Radmila                  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Bull Stephanie J                   | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Gsell Jennifer Lee                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Upstate Infectious Diseases        | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Ceccucci Janice Lynn               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ulster Green Nysarc Flatbush Bld 3 | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Ulster Green Nysarc Flatbush Bld 2 | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Smith-Foy Barbara                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Fogg Jo                            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Bolnick Jay                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Abel David                         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Barry Kelli Ann                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Mekosh Susan Lynn                  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Zen Qin                            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Columbia Memorial Hospital         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Colon Michael                      | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Hnath Jeffrey                      | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Cohen Jason                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Carsello Jeffrey                   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Turinsky Andrew                    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Shepard Timothy Folsom             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| O Malley Rebecca Leigh             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |



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|---------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Cerone Jennifer Rebecca Boden   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Robinson Stacy P                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Allmendinger Nikki              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gainor Jonathan P Md            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Aron Uthayashankar              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Foulke Llewellyn                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shukurova Zukhra                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Datt Chandradai                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Loytra Oleksiy                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Rau Stefan Thomas               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pachucki Kevin Christopher Rpa  | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Parent Colleen E Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Nietsch Hubertus Heinrich       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pregont Scott Michael           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Omeara Shannon Lauren           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Parker Dawne Louise             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Mcdermott Nancy Ellen           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Center For Disability Svcs Nhtd | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |  |
| Denny Martin                    | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Brilliant Rachelle I            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Hida Sven                       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Brakman Patricia                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Kim Richard Lee                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Leduc Laura Howard              | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Miron Carrie Beth               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gearwar David C                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Waxman Michael Jay              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kanthal Marissa Loren           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Brown Sheryl                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Bakhos Charles                  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Thirkannad Indira               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                     | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Obeid Leila Ann                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Porter Allison Kay                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Visiting Nurse Assoc/Albany Tbi   | All Other         | ▼     | ▼       |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |  |
| Gowdara Divakara Murthy Md        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Shin Catherine Hekyung            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Baranov Dmitri                    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Blaisdell Lauren Mackenzie        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Saha Manish                       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Lifesong Inc Day/Ch               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Jones Chandra                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Alshaer Khalil                    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Fiorini Jennifer                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Judson Marc A                     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Spencer Taylor                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gresseau Shirley Md               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Barnwell Nursing & Rehab Cent     | All Other         | ▼     |         | ▼     |         |       |       |        |       |         |       |        |  |
| Kafilludi Ronny                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Rosewood Rehabilitation & Nrs Ctr | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hhdl Inc Nhtd                     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Roberts Jared T                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hart Ashley Rose                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Pacheco Joshua Michael            | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Murtagh Colleen                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Maccio Brenda                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Rutter Ann                        | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Goel Nirmit                       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Eldakar-Hein Shaden               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Brake Sami                        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Guptill Gloria G                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Doelken Peter                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Thevenin Claudwardy               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Barraclough Nancy L Np              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Keating Lawrence                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Alapati Sailaja                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dolen Michael                       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Cousins Joseph                      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Cohen Erik                          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Dvorscak Amanda Jayne               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Evangelist Makenzi C Md             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mills Pond Nursing & Rehab Ctr      | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Perwaiz Muhammad Khurram            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Rhymaun Rachel E                    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tenuta Joachim J Md                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Tilney Peter                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Varlamov Anna                       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ordogh Debbie                       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Frisch Adam Md                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gateway Community Industries Inc Sp | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hutchins Elizabeth Ann              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| The Devereux Foundation             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Detschelt Elizabeth L               | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hayes Jennifer                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Divvela Satyanarayana Murthy        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Zahir Mehjabin                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Eromo Ersno Md                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Iqbal Adeel Azmat                   | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Reed Monica Renee                   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mohsin Intikhab                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Durie Nicole                        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Yager Janet                         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Phoenix Jennifer                    | All Other         | ✓     |         |       | ✓       | ✓     | ✓     |        |       |         | ✓     |        |  |
| Kachurek David P                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |



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| Participating in Projects     |                   |       |         |       |         |       |       |        |       |         |       |        |  |
|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Lauren T Siy                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Green Elizabeth Anne          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Renaud Elizabeth              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Cutry Anthony                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Besong Alice                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Lange Amber L                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ridge Health Services Inc     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Thompson-Badamosi Tanya L     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kaiser Laura Marie            | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Young Linda                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Afroze Farzana                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Shin Joong                    | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Matta Mandeep                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Pilitsis Julie Georgia        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Clark Catherine Nielsen       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| The Devereux Foundation       | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mallapu Shravan K             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Stephanie Noyes               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Janssen Daniel James          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Valerie Thomas                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Libruk Tara Kristine          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Alternative Living Group Spt  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Brutus Valerie                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Rodriguez-Iglesias Realba     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Wintle Catherine Ann          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Schnell Jessica Mae           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Parsons Child And Family Ctr  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Dunkerley Christopher J       | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Albany Medical College        | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Au Angela K Md                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Belvedere Health Services Llc | All Other         | ▼     | ▼       |       |         |       | ▼     |        |       |         |       |        |  |



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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Medina Christopher                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Brendese Stephen C                  | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Balog Amy                           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| The Devereux Foundation             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Cieszynski Veronica Eileen          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Mondelo Doreen Perez                | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Catholic Charities Of Albany Inc Cs | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Montelone Kimberly Ann Np           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Catholic Charities Of Albany Inc Cs | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Catholic Charities Of Albany Inc Cs | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Catholic Char/ Albany Inc Csz05     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Nickels-Nelson Gina Marie           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Searfoss Linda A                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Catholic Char/Albany Inc Csz02      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Borden Jennifer Lynn                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mastrangelo John Armand             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mccarthy Brigid                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Pastena Gaetano Thomas              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Sazon Alexandr                      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Rashid Numan                        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wells Catherine                     | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Pugh John A                         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Kenning Tyler James                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Asif Arif                           | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Hansen Philip                       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chismark Anthony David              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jeannie Ngygen                      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Valley Katie Jayne                  | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Wilkinson Sarah Jane                | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Snyder Ilona                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Carsello Carrie                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Tirabassi Michael V                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jones Rushton Michael               | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Medarov Boris I                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Oakes Jennifer Audi                 | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Marchland Maurice E                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Chang Kit Laura Annelise            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Fulton Center Rehabilitation & Heal | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Weaver Jeffrey                      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Steindler Jason Harrison            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Colman David Lawrence               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Su Xiao                             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Gandarillas Jesus M                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Black Trevor                        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Halsdorf Courtney Soon Hee          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Sharma Vibhasu                      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Garbarino Kathleen Marie            | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Memmelaa Angela R                   | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Clark Kristina Marie                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Nemith Lindsay Mumford              | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Ganey Michael Edward                | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Bunch Marjorie                      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lopez Stephen                       | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Reed Thomas                         | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Lee Hwa                             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Accent Health Care Services Inc     | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Dumrese Danielle Lee                | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mills Jessica L A                   | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Tumuluri Srilaxmi                   | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Sidhu Mandeep Singh                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shah Melissa                        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Stein Julie Ann                     | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |





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|----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                    | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Ditursi Mary Kathleen Williams   | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       | ▼     |        |
| Gozman Alexander                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Friedrich Marcus Edmond          | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Engelhart Heather                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lipscomb Deanna M                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Siegel Eric                      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| O'Connell Sherie M               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mary Patricia Shierly            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ernst Cheryl Elaine              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Shepard Leigh A                  | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ronan Alisha Lynn                | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Kennedy Jeffrey                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Blatz Sarah J Pa                 | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Patel Anar J                     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hassan Jones Lynn B              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Saratoga Hospital                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Eager Jeremy Morgan              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Dibble Colleen M                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hedden Jeffrey Louis             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Catholic Charities Of Albany Ics | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Duncan Luke Joseph               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ellwood Rebecca                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Paige John Alexander             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Hausman Julia H                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sukumaran Sunitha                | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Smith Rachel E                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Maddalena Amy Elizabeth          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Solga Matthias                   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Lawson Jessica L                 | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Devereux Foundation              | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Sundaram Vishalakshi             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gallagher Ellen E             | All Other         | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |
| Huston Jason Michael          | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Vukovic Joseph Thomas         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Galay Igor                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mazur Jordan Thomas           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Derouin Laura C               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Saratoga Hospital             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jhandier Muhammad Nauman      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Krass Jessica A               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Troy Crossing Llc             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Rowlands John                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Coiteux Yvonne C              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Saratoga Hospital             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Saratoga Hospital             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Columbia Co Arc Ics           | All Other         | ▼     |         | ▼     | ▼       |       |       | ▼      | ▼     |         | ▼     |        |
| Jopal Sayville Llc            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Samuel Jency Thomas           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Oluwole Olakunle Kayode       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mathew Roy                    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chopra Amit                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Shawa Hassan                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Pluto Luke A                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bhullar Ravneet               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Morgan Lacey Elizabeth        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Hennessy Elisa                | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Mary Kathleen W Ditursi Md Pc | All Other         | ▼     |         |       | ▼       |       | ▼     |        |       | ▼       | ▼     |        |
| Silverman Eric Ross           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Rizzuto Michael J             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rcal Inc Day/Ch               | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Saratoga Hospital             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Flaherty Michael Andrew       | All Other         |       |         |       |         |       |       |        |       |         |       |        |



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|----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Alpaugh Craig Alan         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kang Kibbum                | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Shaw Colleen Margaret      | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Frasier Kasandra C         | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Ettekal Yashar             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Abraham Christa Rose       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tillack Lindsey            | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Pahwa Suneet Singh         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Winston Brion              | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Subik Maria                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Crowe Karen Gisotti        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Hosaka Mia                 | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Vachon Cary Ian            | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Bellomo Courtney M         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Rose Jennifer              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Kimball Randall Mark       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kambam Madhavi Latha Reddy | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Rooney Danielle Marie      | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Bryan Richard              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mueller Kelly              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Parikh Reena               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tafen Wandji Marcel        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Robinson Kristen           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Adetayo Oluwaseun          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Van Amburgh Marilyn        | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Millea Kerry               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Gilbertson Dorothy         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Mary Annelle Collins       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Chaudhary Shawn Ahmad      | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Faliszek James             | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Celestine Erica            | All Other         | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |  |



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|---------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name             | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Shrinkhla Agrawal         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Rodriguez-Jaquez Carlos R | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Kestler Margaret          | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Kim Kelly-Ann             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Tatagari Jayasree         | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Farrell Claudia Sales     | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Kane Sujata R             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Mabry Myra A              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Raggs Hope G              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Henson Jennifer T         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Russell Jennifer Brooke   | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Light Deborah I           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Collins Kevin P           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Juyia Rushad Farhad       | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Occhiogrosso Marie Anne   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Turner Latasha M          | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Chan York Sing            | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Monahan Meredyth Leigh    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chauvin Rebecca L         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |
| Coloprisko Sara Ann       | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Jopal Bronx, Llc          | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Quinn Barbara Hunter      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Almony Danielle P         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Qandah Juleen Jandali     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Chu Michael H             | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Fraser Fayanne Maria      | All Other         |       |         |       |         |       |       |        |       |         |       |        |
| Gardner Jerry L           | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |
| Wilson Allison Marie      | All Other         | ▼     |         |       | ▼       | ▼     | ▼     |        |       |         | ▼     |        |
| Sazon Tatiana             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Deeb Erin M               | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Masters Cindy N           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|----------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name              | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Gross Julia M              | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Idelchik Gary M            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ellen Joseph Harry Iii     | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Cooley Michael Robert      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Taylor Ben Frazier         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Burke Kelly Laurice        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Sheaffer Margaret A        | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Tan Josenia Narcisa Mailed | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mansen Roberta             | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Ncrnc, Llc                 | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Samson Brianna P           | All Other         | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |  |
| Golden Hill Planning Corp  | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Maroney Justin V           | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Camphill Hudson Ics        | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mack Kristin Lake          | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Redding Jack Eugene        | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Cooley Christine           | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Haber Marc                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Chow Yvonne                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Liu Baogang                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| White Noah                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Steckman David             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Noonan Jessica             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Narayan Ananth             | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Vatsky Seth                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Larsen Douglas P           | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Suchowiecki Kristin M      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Suchowiecki Mark J         | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Karyn Marie Hughes         | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Torre Jenny Ann            | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Albany Medical College     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|---------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Livingston S & V Operations Llc | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Devereux Foundation             | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Mcshane Danine A                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Daniels Randi L                 | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Chaudhary Faisal Rashid         | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Slavin Laura N                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Post David Robert               | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Luthra Munish                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Gordon-Stacey Carrie            | All Other         | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Crosby Erin Claire              | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Joseph Jalaja                   | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Newton Scott                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gold Kristin                    | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Jaitovich Adolfo                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Tadros Michael                  | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Boyd-Smith Molly                | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Deroo Andrew                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Wiczulis Alicia                 | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Zysik Meghan                    | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Powers Crystal                  | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Meagher Colin Patrick           | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Muchiteni Tshaka Tapuwa         | All Other         |       |         |       |         |       |       |        |       |         |       |        |  |
| Welliver Robert Charles Jr      | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Bossolini Marybeth M            | All Other         | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Weintraub Lauren                | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Nair Arjun                      | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Batool Asra                     | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Farooqi Wiqar                   | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Chandolias Nikolaos             | All Other         | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Delamater Jeffrey T             | All Other         | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Lingbloom Andrew L              | All Other         | ▼     |         |       |         |       |       |        |       |         |       |        |  |



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| Provider Name                  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Alvarez Nicole D               | All Other         | ✓     |         |       |         |       |       |        |       |         |       |        |
| Tortorici Danielle Maria       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Wasacz Christopher John        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Metwally Mark                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Weinreb David                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Black Mandy                    | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     |         | ✓     | ✓      |
| Cardinale Carmen               | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Rijhsinghani Asha              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kirkpatrick Yulia Alexandrovna | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stephenson Lisa                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Glaser Jordan                  | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Guidenstern Erin               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Scott Walter                   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Gosnell Laura Catherine        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Ilowit Emily Katharine         | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |
| Poon Edward                    | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kittell Jennifer               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Burrell Keisha Kay             | All Other         | ✓     |         |       |         | ✓     | ✓     |        | ✓     |         | ✓     | ✓      |
| Paravella Dana W               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Hindson David Fessler          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Casivant Belinda M             | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lisinschi Adriana              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Azam Nyla Khalid               | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Mishra Pragnyadip              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Chaudhry Rafia Ishfaq          | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Donovan Sean                   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lavelle Daniel Thor            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Matthew I Stein Md             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Rosario Frances                | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Bruno Natalie                  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Miller Jennifer                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|-------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                 | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Gicewicz Adam                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Guice Stephanie M             | All Other         | ✓     |         |       | ✓       |       | ✓     |        |       | ✓       |       |        |  |
| MacLellan Allison M           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Micca Emily S                 | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Potratz Meagan A              | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Nagaraj Sharita               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Warner Courtney Jill          | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Millett Morgan                | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Navarette Kristen Alexandra   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Monroy Prado Mauricio Ricardo | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Walke Ashley Danielle         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Wales Danielle Patricia       | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Vitale Alex Nathaniel         | All Other         | ✓     |         |       |         | ✓     | ✓     | ✓      |       | ✓       | ✓     | ✓      |  |
| Matott Heather Melissa        | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Clemente Kimberly             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Espiritu Marvee Gay Santiago  | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Ethier Gloria                 | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Williams-Weekes Terri A       | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Garla Sreenivas               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Ennis Corey Elizabeth         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Livolsi Laruen L              | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Elsagga Elizabeth             | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Albany Medical College        | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Langford Stacey               | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Lyons Trent William           | All Other         | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |  |
| Asare Kofi Sarkokie           | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Carlin Kristine Marie         | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Jacobs Laura May              | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Kozak Craig Robert            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Castma Naika Clara            | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Patel Reemaben Rajendrabhai   | All Other         | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |





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|-----------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                     | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Dall Jacqueline Aimee             | All Other         | ▼     |         |       |         | ▼     | ▼     |        | ▼     |         | ▼     | ▼      |  |
| Dutchess Cnty Chapter Nys Arc     | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Alternative Living Group Mr       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Nysarc Dutchess County Hcbs       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Hcbs 1     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 1        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Cath Char Dev Dis Albany Mr       | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 2        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Hcbs 2     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 3     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 4     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 5     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 6     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 3        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Hcbs7      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 4        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Hcbs8      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 9     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs10     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Columbia Co Community Health Care | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 11         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 12         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs5         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Loretta Grimm                     | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 16         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 7        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Char Dds Hcbs 17         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 18         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 19         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 20         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 21         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |



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|-------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                       | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Catholic Char Dds Hcbs 22           | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grp Hcbs 8          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Alternative Living Group Nd 1       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Alternative Living Group Nd 2       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Nd 1         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Char Dds Hcbs 23           | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Cath Charities Hcbs 24              | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Omrdd/Resource Ctr F/Access         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Nysarc Inc Dutchess Cnty Nd 4       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Schenectady County Chapter Nysarc   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Dds Nd 2         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Hcbs 25          | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Alternative Liv Grd Cbs 9           | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Hcbs 26          | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Colonie Senior Service Centers Inc  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Health System Services Ltd          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Parsons Child And Family Center B2h | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds B2h          | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 27      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Catholic Charities Dds Hcbs 28      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Resource Ctr/Accessible Liv Tbi     | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Patricia Saunders                   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Wildwood Programs Inc               | Uncategorized     | ▼     |         |       | ▼       |       |       | ▼      |       | ▼       | ▼     | ▼      |  |
| Katri Noble-Johnson                 | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Ryan Youngs                         | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Kenneth Lampert                     | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Julie Scherer, Np                   | Uncategorized     | ▼     |         |       |         | ▼     | ▼     | ▼      |       | ▼       | ▼     | ▼      |  |
| Loso Joelle                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Beighey William                     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Haberland Jessica Dr.               | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Hulett Joseph                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Cretkos Peter Mr.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Mills Tracy   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Center For Remote Medical Management Llc                              | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Martha Farber   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Vincent Verdile   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Conlee Brent  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Rosen Linda   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Bakowski Susanne  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Thomas Templeton  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Katie Gregg   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Yayoi Miyajima  | Uncategorized     | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |
| Megan Applewhite  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fortin Robert   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Christopher Barela  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Nurmi, Anna (Voc. Rehab-Bachelor'S) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Kaitlyn Wiley   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Deane Sarah   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| James Dewey   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sara Perkins  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Patricia Hale   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sadekoski Richard   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Bauer Kimberly  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Weigel, Amy S. (Psych/Abss)         | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Healy, Brian (Psych/Abss)           | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Whitney M Young Jr., Health Center Inc                                | Uncategorized     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Echt Martin   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Brady Devlin  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Gross Holly Dr.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Kristine E. Andrade, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Whitney M Young Jr., Health Center Inc                                | Uncategorized     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Riihimaki Meghan  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |



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|--|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Raven Vigars   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Francine D'Amato   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Byrne Nicole Dr.   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| James Fitzpatrick  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Saratoga Center For The Family, Inc.                                 | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Neiles Lara  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Peninsula General Nursing Home                                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Judy Kelleher  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Anne Taylor, Crna  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mary Riccio  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Wallock Michelle   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Virginia Pfeil   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Greene County Public Health Nursing Service                          | Uncategorized     | ▼     |         |       |         | ▼     |       |        |       |         | ▼     | ▼      |  |
| Back Vincent Dr.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Poluzzi LII Raymond  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Schdy Cnty Public Health Svcs- Cpse                                  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kristyn Cuomo  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Marcus Leslie  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Elaine Berkun  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Rowley Christine   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Conlee Bonnie  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Belvedere Of Albany  | Uncategorized     | ▼     | ▼       |       |         |       | ▼     |        |       |         |       |        |  |
| Kara Meunier   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Chromczak Christina Dr.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Iris Gonzalo-Sowle, Fnp  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Hannaford Bros. Co., Llc   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ulster-Greene Arc - Rehab Clinic: Califano, Michelle R. (Psych/Abss) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Fiorito Thomas   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Dunn Nancy   | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Family And Child Service Of Schenectady Inc                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Barra Elizabeth  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |



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|--|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name  | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Eaton Mary Mrs.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Resource Medical Services Pc   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| St. John Michelle Ms.  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Jainulabudeen Jalal Mr.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Bove Maria   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Dickinson Timothy  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Newkirk, Carolyn (Voc. Rehab-Master'S) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Vishad Sukul   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Delancey Thomas  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Merr, Steven B. (Psych/Lmhc)           | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Alexandria A. Sanchez  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Rick Mclaughlin  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Micho Jerry  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Liang Lisa   | Uncategorized     | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Dileonardo Greve Mary  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Spada, Jennifer M. (Psych/Lmhc)        | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| People Incorporated  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Living Resources Home Care Agency, Inc                                   | Uncategorized     | ▼     |         |       | ▼       |       |       |        | ▼     | ▼       | ▼     | ▼      |
| Paul Reo   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Padalino Joseph  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Family & Child Service Of Schenectady, Inc.                              | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Family Of Woodstock, Inc   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Amy Tramaloni  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Melissa Porter   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Ward Thomas  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Myers Sonja  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fitzgerald Gerald  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Jennifer L'Heureux, Dmd  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Constance Prince   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Farber Matthew   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Gordon Susan  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Anson Michael   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Tyson Colleen   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Affiliated Pathology Services Pc  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| John Brady  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Mayers Bernadette   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Bourne Cynthia  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| The Eddy Licensed Homecare Agency                                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Leigh Farry   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Rensselaer Operating Co. Dba Rosewood Rehabilitation And Nursing Center | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Devereux Foundation   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| County Of Greene  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Kristen Carrierfenster  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Sullivan Timothy  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ambili Nair   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Rachael Trier Colucciello   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Elaine Hill   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Fortin Ronald   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Corsi Patricia  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Bovee David   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Community Maternity Svcs Bfc  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Janne Victoria Rand, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Aarti Pappu   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Piya Ghoshal, M.D.,P.C.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Wilner George Dr.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Trinity Alliance Of The Capital Region                                  | Uncategorized     | ▼     |         |       |         | ▼     |       |        |       | ▼       |       | ▼      |
| Peter Graves  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Morningside House Nursing Home  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| H A Schachter Ernest Dicker Etal Shore View Nursing Home                | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Regis Chauvot   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Candice Mccooley  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Mcarthur Barbara  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Koelmel Margaret  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Murphy Sarah Mrs.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Nicole Macfarland   | Uncategorized     | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |  |
| Golan Lorraine  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Crowther Alicia   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Living Resources Corp. Mahopac  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Smith Dale  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Brittany Fitzmaurice  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Vu Duy  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Health System Services, Ltd.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Mary May  | Uncategorized     | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |  |
| Poulin Rebekah  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kelman Chad Dr.   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Chauvin Patricia  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ulster-Greene Arc - Rehab Clinic: Gerstheimer, Nicole E. (Psych/Abss) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Molly Ward  | Uncategorized     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Jacalynn Romeyn   | Uncategorized     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |  |
| Nicole Backlund   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Columbia Memorial Hospital  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Eun Mee Ju  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ulster-Greene Arc - Rehab Clinic: Douglas, Elliot T. (Psych/Lmhcc)    | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Whitaker Karleen  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Querube Santana Rivas   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Lewis John Dr.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ulster-Greene Arc - Rehab Clinic: Delczeg, Stephanie L. (Psych, Abss) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Amanda Dow, Do  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Paul-Michel Dossous   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Maryam Ibrahim  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Christine Reu-Donlon  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                               | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Bernhard Christina                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Max R. Pollock, Md                          | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Chowdhury F. Miah                           | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Barry Osthy Sewall, Md                      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Gary Signor                                 | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Roy Laura                                   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Mcdonald Judith                             | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Chelsea Kois                                | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Walton Deborah Ms.                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Capital District Pc                         | Uncategorized     | ▼     |         |       |         |       | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Abbott Karolyn                              | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Morcone Edward                              | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Family & Child Service Of Schenectady, Inc. | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Hrdlicka Maureen                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Kotula Robert                               | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Depoli Alessio Mr.                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Katelyn M. Cullinan                         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Campbell Sharpe Peterson, Crna              | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Mctague Sarah                               | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Patrick M. Matolka                          | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Kim Taik Dr.                                | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Northeast Parent And Child Society, Inc.    | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Welden Catherine                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Anderson Deborah                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Nueva-Espana Hermenia                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Curran Christopher                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Joanne Ziemann                              | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Katharine A. Yoler, Md                      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Ruffen Frederick                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Frances Cavanaugh                           | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Woodworth Diana                             | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |





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|--|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name                          | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Sheffer Marla                          | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Angela Dupuis                          | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Rufenacht Bonnie                       | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Paul D'Amico                           | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Dmitriy Yukhvid                        | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Shirley Helen Bates, Crna              | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Parker Marcus Dr.                      | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Marianne Hunter                        | Uncategorized     | ✓     |         | ✓     |         |       | ✓     |        |       |         |       |        |  |
| Karen Lovell                           | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Leggett Steven                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Erin Gorman                            | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |  |
| Kelly Bowie                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| East Greenbush Central School District | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Cronin Deborah                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Michael Gooch                          | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Tara O'Conner                          | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     |        |       |         |       |        |  |
| Mullin Alexandra Ms.                   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Lyndsey Atwater                        | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Reiner Jennifer                        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Keri L. Vannatten, Crna                | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Voss Kathleen                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ghiocel Sarah                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Melanie Sloan                          | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Divya Cherukupalli                     | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Eric W. Wallace, Md                    | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Hospitality House Tc, Inc.             | Uncategorized     | ✓     |         |       |         |       |       |        |       |         |       |        |  |
| Columbia County                        | Uncategorized     | ✓     |         |       |         | ✓     |       |        |       |         |       |        |  |
| Cronin Kathleen                        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Goff David                             | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |
| Childs Jill                            | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Renat Kudyakov                         | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |  |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|--|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |  |
| Mary Beth Blaustein                                   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| Bridget Desmarais                                     | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Adams David   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Community Care Physicians, Pc                         | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Chamberlain Coreen                                    | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Carly R. Matthews, Pa                                 | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Stacey Lloyd, Macrc - Community Integration Counselor | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ginsburg Lisa   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Mariano Anthony                                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Hornbeck Denise                                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Ulster-Greene Arc - Rehab Clinic: Manning, Kirk (Ma)  | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |  |
| Bull Chelsea  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Joanne V. Dannenhoffer                                | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |  |
| Michael Vincent Murphy, Pa                            | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Hatch Barry   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Dipti V Nevrekar, Md                                  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Crain Robert  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Lacey Ragule  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Jennaleigh Fish                                       | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     |        |       |         |       |        |  |
| Michelle Mccoy  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |  |
| David Lee, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Soyoung Chung   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Jalal Zarina Dr.                                      | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Byrne Timothy Mr.                                     | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Catholic Charities Disabilities Services              | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |  |
| Susan Furdon  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Jennifer Lawlor                                       | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Laura Dewitt  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Minott Yvonne   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |
| Russo Michele   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |  |
| Family & Child Service Of Schenectady, Inc.           | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |  |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Richmond Dionne Ms.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Erica Lunsford  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Larry Nelsen  | Uncategorized     | ▼     |         | ▼     |         |       | ▼     |        |       |         |       |        |
| Maskell-Amirault Mary Ms.   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Clark Allison   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Krysta Brown  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| William Mcclellan   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Melissa A. Deimling   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Romig Jenelle   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Nancy Barrows   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Norelli Lisa Dr.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Center For Disability Services, Inc.                                      | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Jonathan P. Coll, Md  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Timothy Nevinger  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Curran Sara   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Taylor Concordia  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Jones Kiliko  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Lynn Spilman  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Community Maternity Svcs Bfc  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Community Care Physicians, Pc   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Ashley Wall   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Kennedy Shannon   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| William Y. Perez, Dds   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Protsko Allison   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Christopher W. Park, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Patricia Bjurstrom  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Downing Melissa   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Nancy La Pierre   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     |        |       |         |       |        |
| Bearden Deborah   | Uncategorized     | ▼     |         |       |         |       | ▼     |        |       |         |       |        |
| Cary Govel Heather  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Natale (Williams), Melissa (Psych,Abss) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Judith Dougherty  | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Pipito Salvatore  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Boucher Lisa Ms.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Avishkar Tyagi, Md                                      | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Stachnik Laura  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Zink Darcy  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Pierce, Melissa       | Uncategorized     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Commission On Economic Opportunity                      | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Kristen Sergott   | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kendall Robert  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Crystal M. Santiago                                     | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     |        | ✓     | ✓       | ✓     | ✓      |
| Christabel Grullon-Zannou                               | Uncategorized     | ✓     | ✓       |       |         |       |       |        | ✓     | ✓       |       | ✓      |
| D'Aversa Suzanne  | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Hall Shelby   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Senior Services Centers Of The Albany Area, Inc         | Uncategorized     | ✓     |         |       |         |       |       |        |       |         |       |        |
| Katherine Calder  | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Paul Rodden   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Community Maternity Svcs Bfc                            | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Lanese Tracey   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Lange Jean Mrs.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Laura Igoe-Krueger                                      | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Lash Sandra   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Community Maternity Services                            | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      |       |         | ✓     | ✓      |
| Cupelli Donna   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Daniel A. Strauchler, Md                                | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Nitta Rubina  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Armando S. Garza, Md                                    | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Yevgeniya Bamme   | Uncategorized     | ✓     | ✓       |       | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |
| Kee To Independent Growth, Inc.                         | Uncategorized     | ✓     | ✓       |       |         |       | ✓     |        |       |         |       |        |
| Livingston Hills Nursing And Rehabilitation Center, Llc | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Manal M. Schoellerman, Md                               | Uncategorized     | ✓     | ✓       | ✓     | ✓       | ✓     | ✓     | ✓      | ✓     | ✓       | ✓     | ✓      |



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|--------------------------------------|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|---|
| Provider Name                        | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |   |
| Sehgal Sumit                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Steven Marcal                        | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Massad Margaret                      | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Paul Duncan Meier, Pa                | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Mercogliano Vincent                  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Janine Carroll                       | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Kevin P. Rudny, Md                   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Gabriel Joseph                       | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Doody Katherine                      | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Kitty Thomas                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Amanda Cardoze                       | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |   |
| Christopher Bennett, Anp             | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Lyman Bruce                          | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Linda Kowalski                       | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Mastando Toni-Ann                    | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Iannon Phillip Mr.                   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Crucetti Nicholas                    | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Colonie Senior Service Centers, Inc. | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Vishal Verma, Md                     | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Mcfaden Lisa                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Riley Kristen                        | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Michael C. Lin, Md                   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      | ▼ |
| Wamsley John                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| David Krista                         | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Glaucoma Practice Of New York, Pllc  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Columbia County Department Of Health | Uncategorized     | ▼     |         |       |         | ▼     |       |        |       |         |       |        |   |
| Grimm Erin                           | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Inpatient Hospitalist Services Of N  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |
| Susan Wildemann                      | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |   |
| Albany Co Hlth Dept Psshsp           | Uncategorized     | ▼     |         |       |         | ▼     |       |        | ▼     | ▼       |       |        |   |
| Nwakeze Agatha Mrs.                  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |   |



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**Albany Medical Center Hospital (PPS ID:1)**

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| Participating in Projects   |                   |       |         |       |         |       |       |        |       |         |       |        |
|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Boice Marissa   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc (Health Home)   | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Ned Panara  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Adam Blau   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Hhdl Inc.   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Hudson River Healthcare, Inc.   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     |       |        |       |         | ▼     | ▼      |
| Allen Scott   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Andrea Fisher   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Senior Sharon   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Belvedere Of Albany   | Uncategorized     | ▼     | ▼       |       |         |       | ▼     |        |       |         |       |        |
| Bratek Zachary  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Blake A. Wynia  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Samantha Weller   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Whitney M Young Jr., Health Center Inc                                    | Uncategorized     | ▼     | ▼       |       |         |       |       |        | ▼     | ▼       |       | ▼      |
| Kristin Mcferran-Ackner   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Greater Adirondack Home Aides   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Hiscock Kevin Mr.   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Fitzpatrick Brittany  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Rebecca Lamanna   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     |        | ▼     | ▼       | ▼     | ▼      |
| Leigh Borgstrom   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      |       |         | ▼     | ▼      |
| Ulster-Greene Arc - Rehab Clinic: Warren, Deborah (Voc. Rehab-Bachelor'S) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Cross-Briggs Julie  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Whitney Bean  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Vadney Nicholas   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Michelle Frolo, Pa  | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Alyssa Irla   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Margaret Cipperly   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Henry Pohl  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Salhoff Donald  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Maria Englert   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| William R. Rogers, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |



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|---|-------------------|-------|---------|-------|---------|-------|-------|--------|-------|---------|-------|--------|
| Provider Name   | Provider Category | 2.a.i | 2.a.iii | 2.a.v | 2.b.iii | 2.d.i | 3.a.i | 3.a.ii | 3.b.i | 3.d.iii | 4.b.i | 4.b.ii |
| Pasternack Anita Dr.  | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Walker Arthur   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Perretta Danielle   | Uncategorized     |       |         |       |         |       |       |        |       |         |       |        |
| Ulster-Greene Arc - Rehab Clinic: Weiner, Michele A. (Psych/Abss) | Uncategorized     | ▼     |         |       |         |       |       |        |       |         |       |        |
| Pratik Vyas   | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     |         | ▼     | ▼      |
| Robert B. Fortuna, Md   | Uncategorized     | ▼     | ▼       | ▼     | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |
| Marilynn Orr  | Uncategorized     | ▼     | ▼       |       | ▼       | ▼     | ▼     | ▼      | ▼     | ▼       | ▼     | ▼      |

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