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

DSRIP Project Plan Applications:

Domain 2 DSRIP Project Plan Applications
Domain 3 DSRIP Project Plan Applications
Domain 4 DSRIP Project Plan Applications

Table of Contents

Domain 2 DSRIP Project Plan Applications

2.a.i Create an Integrated Delivery System focused on Evidence-Based Medicine and Population Health Management……1
2.a.ii Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the NYS Health Innovation Plan (SHIP))……8
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……15
2.a.iv Create a Medical Village Using Existing Hospital Infrastructure……22
2.a.v Create a Medical Village/Alternative Housing Using Existing Nursing Home Infrastructure……29
2.b.i Ambulatory ICUs……36
2.b.ii Development of Co-Located Primary Care Services in the Emergency Department (ED)……43
2.b.iii ED Care Triage for At-Risk Populations……50
2.b.iv Care Transitions Intervention Model to Reduce 30-day Readmissions for Chronic Health Conditions ……57
2.b.v Care Transitions Intervention for Skilled Nursing Facility (SNF) Residents……64
2.b.vi Transitional Supportive Housing Services……71
2.b.vii Implementing the INTERACT Project (Inpatient Transfer Avoidance Program for SNF)……78
2.b.viii Hospital-Home Care Collaboration Solutions……84
2.b.ix Implementation of Observational Programs in Hospitals……90
2.c.i To Develop a Community Based Health Navigation Service to Assist Patients to Access Healthcare Services Efficiently……96
2.c.ii Expand Usage of Telemedicine in Underserved Areas to Provide Access to Otherwise Scarce Services……102
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……108

Domain 3 DSRIP Project Plan Applications

3.a.i Integration of Primary Care and Behavioral Health Services……116
3.a.ii Behavioral Health Community Crisis Stabilization Services……123
3.a.iii Implementation of Evidence-Based Medication Adherence Program in Community Based Sites for Behavioral Health Medication Compliance……131
3.a.iv Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal services) Capabilities and Appropriate Enhanced Abstinence Services within Community-Based Addiction Treatment Programs……136
3.a.v Behavioral Interventions Paradigm (BIP) in Nursing Homes……143
3.b.i Evidence-Based Strategies for Disease Management in High Risk/Affected Populations (Adults Only)……150
3.b.ii Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only)……157

3.c.i Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only)……**164**
3.c.ii Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only) ……**171**
3.d.i Development of Evidence Based Medication Adherence Programs (MAP) in Community Settings – Asthma Medication……**178**
3.d.ii Expansion of Asthma Home-Based Self-Management Program……**185**
3.d.iii Implementation of Evidence Based Medicine Guidelines for Asthma Management……**192**
3.e.i Comprehensive Strategy to Decrease HIV/AIDS Transmission to Reduce Avoidable Hospitalizations—Development of Center of Excellence for Management of HIV/AIDS……**198**
3.f.i Increase Support Programs for Maternal and Child Health (Including High Risk Pregnancies)……**205**
3.g.i Integration of Palliative Care into the PCMH Model……**212**
3.g.ii Integration of Palliative Care into Nursing Homes……**219**
3.h.i Specialized Medical Home(s) for Chronic Renal Failure……**226**

Domain 4 DSRIP Project Plan Applications

4.a.i Promote mental, emotional, and behavioral (MEB) well-being in communities (Focus Area 1)……**232**
4.a.ii Prevent Substance Abuse and Other Mental Emotional Disorders (Focus Area 2)……**236**
4.a.iii Strengthen Mental Health and Substance Abuse Infrastructure across Systems (Focus Area 3)……**240**
4.b.i Promote tobacco use cessation, especially among low SES populations and those with poor mental health (Focus Area 2; Goal #2.2)……**244**
4.b.ii Increase Access to High Quality Chronic Disease Preventative Care and Management in Both Clinical and Community Settings (Focus Area 3) (This project targets chronic diseases that are not included in Domain 3, such as cancer)……**248**
4.c.i Decrease HIV morbidity (Focus Area 1; Goal #1)……**252**
4.c.ii Increase early access to, and retention in, HIV care (Focus Area 1; Goal #2)……**256**
4.c.iii Decrease STD morbidity (Focus Area 1; Goal #3)……**260**
4.c.iv Decrease HIV and STD disparities (Focus Area 1; Goal #4)……**264**
4.d.i Reduce premature births (Focus Area 1; Goal 1)……**268**

2.a.i Create an Integrated Delivery System focused on Evidence-Based Medicine and Population Health Management

Project Objective: Create an Integrated Delivery System focused on Evidence-Based Medicine and Population Health Management.

Project Description: This project will require an organizational structure with committed leadership, clear governance and communication channels, a clinically integrated provider network, and financial levers to incentivize and sustain interventions to holistically address the health of the attributed population and reduce avoidable hospital activity. For this project, avoidable hospital activity is defined as potentially-preventable admissions and readmissions (PPAs and PPRs) that can be addressed with the right community-based services and interventions. This project will incorporate medical, behavioral health, post-acute, long term care, social service organizations and payers to transform the current service delivery system – from one that is institutionally-based to one that is community-based. This project will create an integrated, collaborative, and accountable service delivery structure that incorporates the full continuum of services. If successful, this project will eliminate fragmentation and evolve provider compensation and performance management systems to reward providers demonstrating improved patient outcomes.

Each organized integrated delivery system (IDS) will be accountable for delivering accessible evidence-based, high quality care in the right setting at the right time, at the appropriate cost. By conducting this project, the PPS will commit to devising and implementing a comprehensive population health management strategy – utilizing the existing systems of participating Health Home (HH) or Accountable Care Organization (ACO) partners, as well as preparing for active engagement in New York State's payment reform efforts.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

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.
2. Utilize partnering HH and ACO population health management systems and capabilities to implement the strategy towards evolving into an IDS.
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.
4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.

5. Ensure that EHR systems used by participating safety net providers must meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
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.
7. Achieve 2014 Level 3 PCMH primary care certification for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of ~~DY~~Demonstration Year (DY) 3.
8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.
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.

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expanded current resources, or alternatively, to repurpose existing resources (e.g., targeted bed reduction) to meet the needs of the community.~~Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

c. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project, and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~c.~~d. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. System Transformation Vision and Governance (1500 word limit, Total Possible Points – 20)

a. Please describe the comprehensive strategy and action plan for reducing the number of unnecessary acute care or long-term care beds in parallel with developing community-based healthcare services, such as ambulatory, primary care, behavioral health and long term care (e.g. reduction to hospital beds, recruitment of specialty providers, recruitment of additional primary care physicians, hiring of case managers, etc.). The response must include specific IDS strategy milestones indicating the commitment to achieving an integrated, collaborative, and accountable service delivery structure.

b. Please describe how this project's governance strategy will evolve participants into an integrated healthcare delivery system. The response must include specific governance strategy milestones indicating the commitment to achieving true system integration (e.g., metrics to exhibit changes in aligning provider compensation and performance systems, increasing clinical interoperability, etc.).

3. Scale of Implementation (Total Possible Points - 20):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information: below.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

Please indicate the total number of providers by county that the PPS intends to include in the IDS by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Hospitals		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Skilled Nursing Facilities/Nursing Homes		
Pharmacy		
Hospice		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Skilled Nursing Facilities/Nursing Homes			
Pharmacy			
Hospice			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

~~Project Scale~~	~~Number Total Committed (10 Points)~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County (10 Points)~~
~~Expected # of Hospitals~~			
~~Expected # of PCPs~~			

~~Expected # of Nursing Facilities~~			
~~Expected # of Behavioral Health Providers~~			
~~Expected # of All Other Providers~~			

~~*Based on Department of Health Safety Net Provider designation~~

a. Please indicate the total expected volume of patients the PPS intends to ~~target~~ engage throughout this project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

4. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and ~~impact on the target population~~active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:~~.~~

a. Please indicate the ~~Demonstration Year~~Demonstration Year (DY) and Quarter by which all participating providers will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for ~~engagement of patients~~ achieving 100% engagement of total expected number of actively engaged patients identified. ~~within the project.~~ For

example, the PPS may indicate that 25% of ~~targeted~~ patients will be actively engaged by the end of ~~Demonstration year~~Demonstration Year (DY) 1, 50% by the end of ~~Demonstration year~~DY~~emonstration Year (DY)~~ 2, and 100% by the end of DY 3. ~~etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
~~Expected #~~Number of *Actively Engaged* Patients										
~~Targeted Population~~Expected # of Actively Engaged Patients										
% of Patients ~~that are~~ *Actively Engaged*										

For this project, Actively Engaged is defined as patients residing in counties served by the PPS having completed a RHIO Consent Form (including agreeing or denying consent). Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

5. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

6. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards the implementation of the IDS strategy and action plan, governance, completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics.** Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.a.ii Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the NYS Health Innovation Plan (SHIP))

Project Objective: This project will transform all safety net providers in primary care practices into NCQA 2014 Level 3 Patient Centered Medical Homes (PCMHs) or Advanced Primary Care Models by the end of Demonstration~~SRIP~~ Year (DY) 3.

Project Description: A key requirement of the health care transformation is the availability of high quality primary care for all Medicaid recipients and uninsured, including children and patients with higher risks. This project will address those providers who are not otherwise eligible for the necessary support or resources for practice advancement as well as those providers with multiple sites that wish to undergo a rapid transformation by achieving NCQA 2014 Level 3 Patient Centered Medical Homes (PCMHs) or Advanced Primary Care Models by the end of Demonstration Year (DY)~~DSRIP Year~~ 3. Performing Provider Systems undertaking this project, while focused on the full range of attributed Medicaid recipients and uninsured, should place special focus on ensuring children and parenting adults, and other high needs populations, to have access to high quality of care, including integration of primary, specialty, behavioral and social care services.

Project applicants should review the extensive literature available from such resources as TransforMed (https://www.transformed.com/) in the development of the response.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Ensure that ~~all~~ all participating PCPs ~~primary care providers within the PPS~~ meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of ~~DSRIP Year~~Demonstration Year (DY) 3.
2. Identify a physician champion with knowledge of PCMH implementation for each primary care practice included in the project.
3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices.
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 ~~secure notifications/messaging~~~~Direct~~direct exchange (secure messaging), alerts and patient record look up~~,~~ by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards.
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.

7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management.
8. Implement preventive care screening protocols including behavioral health screenings (PHQ-9, SBIRT) for all patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner.
9. Implement open access scheduling in all participating primary care practices.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the ~~target patient~~ patient population ~~you expect to engage~~ expected to be engaged ~~that will be impacted by~~through the implementation of this project. ~~Target~~ The definition of patient population ~~population must~~ be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below:~~.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of PCPs the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable. This number should be entered~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Clinics		

~~in the table as *Total Committed*.~~

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Clinics			

~~Project Scale~~	~~Number Total Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~PCPs participating in project~~			

**Based on Department of Health Safety Net Provider designation*

a. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively*

Engaged Patients. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information:~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating providers will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all PCPs participating in project will achieve all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who receive ~~appropriate~~ preventive care screenings from participating providers to identify unmet medical or behavioral health needs from participating PCPs. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**
Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

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

Project Objective: This project will expand access to community primary care services and develop integrated care teams (physicians and other practitioners, behavioral health providers, pharmacists, nurse educators and care managers from Health Homes) to meet the individual needs of higher risk patients. These patients do not qualify for care management services from Health Homes under current NYS HH standards (i.e., patients with a single chronic condition but are at risk for developing another), but on a trajectory of decreasing health and increasing need that will likely make them HH eligible in the near future.

Project Description: There is a population of Medicaid members who do not meet criteria for Health Homes but who are on a trajectory that will result in them becoming Health Home super-utilizers. This project represents the level of service delivery and integration for the complex super-utilizer population who fall in between the patient-centered medical home and the Health Home general population. Some risk stratification systems refer to these patients as "the movers." Early intervention through this project shall result in stabilization reduction in health risk and avoidable service utilization.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH PCPs in care coordination within the program.
2. Ensure all participating 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 or Advanced Primary Care accreditation by ~~Demonstration Year~~Demonstration Year (DY) 3.
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~~direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~.
4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards.
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.
6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.
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.

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).
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.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below:~~.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of PCPs the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable. This number should be entered in the table as *Total Committed*.~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			

Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

~~Project Scale~~	~~Number Total Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~PCPs participating in project~~			

**Based on Department of Health Safety Net Provider designation*

~~a.~~b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information:~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating ~~providers~~PCPs will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all PCPs participating in project will achieve all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients ~~who complete Health Home Patient Information Sharing Consent Form (DOH 5055).~~who completed a comprehensive care management plan. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.a.iv Create a Medical Village Using Existing Hospital Infrastructure

Project Objective: To reduce excess bed capacity and repurpose unneeded inpatient hospital infrastructure into "medical villages" by creating integrated outpatient service centers to provide emergency/urgent care as well as access to the range of outpatient medicine needed within the community.

Project Description: This project will convert outdated or unneeded hospital capacity into a stand-alone emergency department/urgent care center. This reconfiguration, referred to as a "medical village," will allow for the new space to be utilized as the center of a neighborhood's coordinated health network, supporting service integration and providing a platform for primary care/behavioral health integration. The proposed medical villages should be part of an "integrated delivery system" and be seen by the community as a "one-stop-shop" for health and health care.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Convert outdated or unneeded hospital capacity into an outpatient services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.
2. Provide a detailed timeline documenting the specifics of bed reduction and rationale. Specified bed reduction proposed in the project must include active or "staffed" beds.
3. Ensure that ~~all~~ all participating PCPs ~~project participants~~ meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of ~~DSRIP Year~~Demonstration Year (DY) 3.
4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including ~~Direct~~direct exchange (secure messaging), alerts and patient record look up. ~~secure notifications/messaging.~~
5. Use EHRs and other technical platforms to track all patients engaged in the project.
6. Ensure that EHR systems used in Medical Villages must meet Meaningful Use and PCMH Level 3 standards.
7. Ensure that services that migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.

Partners Participating in this Project

Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.
~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please indicate the total number of staffed hospital beds this projects intends to reduce.

Project Scale	Number of Beds Committed For Reduction
Expected Number of Staffed Beds to be Reduced	

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the number of Medical Villages this project will establish by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Expected Number of Medical Villages Established	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Hospice			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total~~

~~expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. **Speed of Implementation/Patient Engagement (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Medical Villages will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all Medical Villages will achieve all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively*~~

~~*engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who had two or more distinct non-emergency services from at least two distinct participating providers at a Medical Village in a year. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.a.v Create a Medical Village/Alternative Housing Using Existing Nursing Home Infrastructure

Project Objective: To transform current nursing home infrastructure into an infrastructure consistent with the long term care programs developing in the state to help ensure that the comprehensive care needs of this community are met.

Project Description: As more services are delivered in the community, New York State intends for this Medical Village/Alternative Housing Project to allow nursing homes to reduce their bed capacity. This project will convert outdated or unneeded skilled nursing hospital capacity into a stand-alone comprehensive care center. In addition to bed reduction, this project seeks to create other services in the continuum of care that meet community needs, such as respite services (Scheduled Short Term Admissions), NYS certified adult home, a certified Enriched Housing Program, licensed assisted living residence (Basic, Enhanced, Special Needs), and transitional supportive housing (as defined in DSRIP Glossary). This project will convert outdated/unneeded hospital capacity into a stand-alone emergency department/urgent care center and/or spaces occupied by local service organizations and primary care/specialized/behavioral health clinics with extended hours and staffing.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Transform outdated (underperforming) nursing home capacity into a stand-alone emergency department/urgent care center or other healthcare-related purpose.
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.
3. Provide a clear description of the 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.
4. Provide documentation that demonstrates housing plans are consistent with the Olmstead Decision and any other federal requirements.
5. Identify specific community-based services that will be developed in lieu of these beds based upon the community need.
6. Use EHRs and other technical platforms to track all patients engaged in the project.
7. Ensure that all participating PCPs ~~all project participants~~ meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of ~~DSRIP Year~~Demonstration Year (DY) 3.
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~~direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~.

9. Ensure that EHR systems used in Medical Villages meet Meaningful Use and PCMH Level 3 standards.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~b.~~f. Please indicate the total number of staffed nursing home beds this projects intends to reduce.

Project Scale	Number of Beds Committed For Reduction
Expected Number of Staffed Nursing Home Beds to be Reduced	

2. **Scale of Implementation (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

   a. Please indicate the number of Medical Villages this project will establish by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Expected Number of Medical Villages Established	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Skilled Nursing Facilities/Nursing Homes			
Pharmacy			
Hospice			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Medical Villages will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~Please indicate the Demonstration Year~~Demonstration Year (DY) and Quarter by which all Medical Villages will achieve all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

a.b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients Expected # of *Actively Engaged* Patients										
Expected # of Actively Engaged PatientsTargeted Population										
% of Patients *Actively Engaged* % of Patients that are *Actively Engaged*										

For this project, Actively Engaged is defined as the number of participating patients who had two or more distinct non-emergency services from at least two distinct participating providers at Medical Village within a year. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.i Ambulatory ICUs

Project Objective: To create Ambulatory ICUs for patients with multiple co-morbidities including non-physician interventions for stabilized patients with chronic care needs.

Project Description: An Ambulatory ICU will create a multi-provider team for patients with complex medical, behavioral conditions and social complexities. An Ambulatory ICU will also include community-based non-physician care, complex specialty care (e.g., housing, rehab, etc.), for stable patients in need of additional social services. Clinical interoperability within the Ambulatory ICU will allow for efficient identification of patients and connect those patients in need of complex services by allocating levels of service only as needed.

It is expected that the applicant will implement this project at one or more sites consistent with the NukaModel which is endorsed by the Institute for Healthcare Improvement. The relationship-based Nuka System of Care is comprised of organizational strategies and processes; medical, behavioral, dental and traditional practices; and supporting infrastructure that work together - in relationship - to support wellness. Applicants should refer to the Nuka Model in developing the response:
http://www.cmcgc.com/media/handouts/29IH01/M22_NukaModel_Eby.pdf

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.
2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.
3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.
4. Establish care managers co-located at each Ambulatory ICU site.
5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including ~~Direct~~direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~.
6. Ensure that EHR systems used by participating providers meet Meaningful Use and PCMH Level 3 standards.
7. Implement a secure patient portal that supports patient communication and engagement as well as provides assistance for self-management.
8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the input of multiple providers.
9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care and utilization.
10. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~**Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the number of Ambulatory ICUs this project will establish by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Expected Number of Ambulatory ICUs Established	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Ambulatory ICUs will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met**.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all Ambulatory ICUs will achieve all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc~~.

For this project, Actively Engaged is defined as the number of participating patients who had two or more distinct services at an Ambulatory ICU in a year. Please note: It is expected that the baseline

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.ii Development of Co-Located Primary Care Services in the Emergency Department (ED)

Project Objective: To improve access to primary care services with a PCMH model co-located/adjacent to community emergency services.

Project Description: Patients in certain communities are accustomed to and comfortable with seeking their health care services in the hospital setting, frequently leading to overuse of emergency department services for minor conditions while missing preventive health care services. This project will allow faculty to have a co-located primary care PCMH adjacent to the ED. The PCMH practice will have extended hours and open access scheduling. This will allow patients presenting to the ED who, after triage, are found not to need emergency services be redirected to the PCMH, beginning the process of engaging patients in comprehensive primary care.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Ensure appropriate location of the co-located primary care services in the ED to be located on the same campus of the hospital. All relocated PCMH practices will meet NCQA 2014 Level 3 PCMH standards within 2 years after relocation.
2. Ensure that new participating PCP ~~practices~~ meet NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of ~~DSRIP Year~~Demonstration Year (DY) 3. At start up, ~~the practice~~participating PCPs must have open access scheduling extended hours, and have EHR capability that is interoperable with the ED.
3. Develop care management protocols for triage and referral to ensure compliance with EMTALA standards.
4. Ensure EHR utilization including supporting secure notifications/messaging as well as sharing medical records between the participating providers via Meaningful Use standards.
5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, promote self-management and knowledge on appropriate care.
6. Implement a comprehensive payment and billing strategy. (The PCMH may only bill usual primary care billing codes and not emergency billing codes.)
7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager, as applicable.
8. Utilize culturally competent community based organizations to raise community awareness of alternatives to the emergency room.
9. Implement open access scheduling in all participating primary care practices.
10. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources **(1500 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the number of Emergency Departments which will contain co-located primary care services by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Emergency Departments which contain co-located primary care services	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Hospitals			
Clinics			
Health Home/Care Management			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. **Speed of Implementation/Patient Engagement (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Emergency Departments which contain co-located primary care services will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all Emergency Departments which contain co-located primary care services will achieve all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4

Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as number of participating patients who presented at the ED ~~for triage~~ but were successfully and appropriately redirected to PCMH, after triage. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system initiative or are expected to be involved in during the life of the DSRIP program related ~~reform initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1, ~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.iii ED Care Triage for At-Risk Populations

Project Objective: To develop an evidence-based care coordination and transitional care program that will assist patients to link with a primary care physician/practitioner, support patient confidence in understanding and self-management of personal health condition(s). Objective is also to improve provider-to-provider communication and provide supportive assistance to transitioning members to the least restrictive environment.

Project Description: Emergency rooms are often used by patients to receive non-urgent services for many reasons including convenience, lack of primary care physician, perceived lack of availability of primary care physician, perception of rapid care, perception of higher quality care and familiarity. This project will impact avoidable emergency room use, emphasizing the availability of the patient's primary care physician/practitioner. This will be accomplished by making open access scheduling and extending hours, EHR, as well as making patient navigators available. The key to this project's success will be to connect frequent ED users with the PCMH providers available to them.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Establish ED care triage program for at-risk populations.
2. Participating EDs will establish partnerships ~~to~~ with community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.
    a. All participating PCPs Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of ~~DSRIP Year~~Demonstration Year (DY) 3.
    b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.
    c. Ensure real time notification to a Health Home care manager as applicable.
3. For patients presenting with minor illnesses who do not have a primary care provider:
    a. Patient navigators will assist the presenting patient to receive a ~~immediate~~ timely appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.
    b. Patient navigator will assist the patient with identifying and accessing needed community support resources.
    c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care provider).
4. Establish 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.)
5. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*.~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of Emergency Department sites where Care Triage will be established by the ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Total Committed
Emergency Departments with Care Triage	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Hospitals			
Clinics			
Health Home/Care Management			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. **Speed of Implementation/Patient Engagement (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Emergency Departments with Care Triage will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all EDs with Care Triage will achieve all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients										

~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as number of participating patients presented at the ED and appropriately referred for medical screening examination and successfully redirected to PCP as demonstrated by a connection with their Health Home care manager or a scheduled appointment. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1, ~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.iv Care Transitions Intervention Model to Reduce 30-day Readmissions for Chronic Health Conditions

Project Objective: To provide a 30-day supported transition period after a hospitalization to ensure discharge directions are understood and implemented by the patients at high risk of readmission, particularly patients with cardiac, renal, diabetes, respiratory and/or behavioral health disorders.

Project Description: A significant cause of avoidable readmissions is non-compliance with discharge regiments. Non-compliance is a result of many factors including health literacy, language issues, and lack of engagement with the community health care system. Many of these can be addressed by a transition case manager or other qualified team member working one-on-one with the patient to identify the relevant factors and find solutions. The following components to meet the three main objectives of this project, 1) pre-discharge patient education, 2) care record transition to receiving practitioner, and 3) community-based support for the patient for a 30-day transition period post-hospitalization.
Additional resources for these projects can be found at www.caretransitions.org and http://innovation.cms.gov/initiatives/CCTP/.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.
2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.
3. Ensure required social services participate in the project.
4. Transition of care protocols will include early notification of planned discharges and the ability of the transition case manager to visit the patient while in the hospital to develop the transition of care services.
5. Establish protocols that include care record transitions with timely updates provided to the members' providers, particularly delivered to members' primary care provider.
6. Ensure that a 30-day transition of care period is established.
7. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. ~~a.~~ Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of Hospitals the PPS intends to include in the project by Demonstration YearDemonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.~~

~~Project Scale~~	~~Number Total Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety New Providers by County~~
~~Hospitals~~			

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Hospitals		
Health Home/Care Management		
Community Based Organizations		
All Other		

~~*Based on Department of Health Safety Net Provider designation.~~

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Health Home/Care Management			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to

be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) ~~4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information.
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating hospitals will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.~~Please indicate the Demonstration Year~~Demonstration Year (DY) and Quarter by which all Hospitals participating in project will achieve all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively*~~

engaged by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients Expected # of *Actively Engaged* Patients										
Expected # of Actively Engaged PatientsTargeted Population										
% of Patients *Actively Engaged* % of Patients that are *Actively Engaged*										

For this project, Actively Engaged is defined as the number of participating patients with a ho complete care transition plan developeds within 30 days of discharge prior to discharge who are not readmitted within that 30-day period. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of

project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1, ~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.v Care Transitions Intervention for Skilled Nursing Facility (SNF) Residents

Project Objective: Utilizing a similar model as 2.b.iv, this project will provide a supported transition period after a hospitalization to ensure discharge directions are understood and implemented specifically for skilled nursing facilities (SNF) at high risk of readmission, particularly those with cardiac, renal, diabetes, respiratory and/or psychiatric disorders.

Project Description: Nursing home patients with recent hospital discharges are at risk for re-hospitalization. This is often due to inadequate care coordination between the SNF staff and the hospital staff. For example, discharge summaries may not be complete nor include minor facts that can become significant in the SNF environment. PPS' undertaking this project must complete the following requirements to meet the two main objectives: 1) SNF staff access to hospital patient record and hospital staff prior to patient discharge and 2) timely care record transition to SNF and receiving practitioner. Additional resources for this project can be found at www.caretransitions.org

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Partner with associated SNFs to develop a standardized protocols to assist with resolution of the identified issues.
2. Engage with the Medicaid Managed Care Organizations and Managed Long Term Care or FIDA Plans associated with their identified population to develop transition of care protocols, ensure covered services including DME will be readily available, and that there is a payment strategy for the transition of care services.
3. Develop transition of care protocols will include timely notification of planned discharges and the ability of the SNF staff to visit the patient and staff in the hospital to develop the transition of care services. Ensure that all relevant protocols allow patients in end-of-life situations to transition home with all appropriate services.
4. Establish protocols for standardized care record transitions to the SNF staff and medical personnel.
5. Ensure that all participating hospitals and SNFs have shared EHR system capability and HIE/RHIO/SHIN-NY access for electronic transition of medical records by the end of DSRIP Y3.
6. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project

Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.~~Please indicate the total number of Skilled Nursing Facilities the PPS intends to include in the project by Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable. This number should be entered in the table as *Total Committed.*~~

~~Project Scale~~	~~Number Total Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety New Providers by County~~
~~Skilled Nursing Facilities~~			

~~**Based on Department of Health Safety Net Provider designation.*~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Hospitals		
Skilled Nursing Facilities/Nursing Homes		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Skilled Nursing Facilities/Nursing Homes			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

a.b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following informationDSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Skilled Nursing Facilities will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all Skilled Nursing Facilities will achieve all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and

100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients with a care transition plan developed prior to discharge who are not readmitted within that 30-day period. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.~~For this project, Actively Engaged is defined as the number of participating patients who complete care transition plans within 30-days of discharge. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.~~

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1,~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.vi Transitional Supportive Housing Services

Project Objective: Participating hospitals will partner with community housing providers and home care service organizations to develop transitional supportive housing for high-risk patients who, due to their medical or behavioral health conditions, have difficulty transitioning safely from a hospital into the community.

Project Description: Access to safe transitional supportive housing is a key determinant in stabilizing chronically ill super-utilizers of health care. The availability of secure housing and home care services includes services which will allow the discharged patient to stabilize in the outpatient, community setting instead of "ping-ponging" back to the hospital due to housing instability. This project will establish partnerships with community housing providers and home care service organizations to develop transitional housing for high-risk patients. In addition to transitional supportive housing, this project will provide short-term care management and a coordinated transition to a longer term care management or a PCMH, allowing additional time to support stabilization, rehabilitation and recovery.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Partner with community housing providers and home care service organizations to develop transitional supportive housing for high-risk patients.
2. Develop protocols to identify chronically ill super-utilizers who qualify for this service. Once identified, this targeted population will be monitored using a priority listing for access to transitional supportive housing.
3. Establish MOUs and other service agreements between participating hospitals and community housing providers to allow the transitional supportive housing and home care services staff to meet with patients in the hospital and coordinate the transition.
4. Establish coordination of care strategies with Medicaid Managed Care Organizations to ensure needed services at discharge are covered and in place at the transitional supportive housing site.
5. Develop transition of care protocols to ensure all chronically ill super-utilizers receive appropriate health care and community support including medical, behavioral health, post-acute care, long-term care and public health services.
6. Ensure medical records and post-discharge care plans are transmitted in a timely manner to the patient's primary care provider and frequently used specialists.
7. Establish procedures to connect the patient to their Health Home (if a HH member) care manager in the development of the transitional supportive housing plan or provides a "warm" referral for assessment and enrollment into a Health Home (with assignment of a care manager).
8. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):
DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those

projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of transitional beds for high-risk patients the PPS intends develop through project by ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Total Committed
Number of Transitional Beds Established for High-Risk Patients	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Health Home/Care Management			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all project requirements will be met. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the participating providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all project requirements will achieved~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients										

~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who utilized transitional supportive housing and were appropriately monitored via telephonic or face-to-face contact throughout a 90-day transition period to address a specific housing-related need. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1,~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.vii Implementing the INTERACT Project (Inpatient Transfer Avoidance Program for SNF)

Project Objective: Skilled nursing facilities (SNFs) will implement the evidence-based INTERACT program developed by Joseph G. Ouslander, MD and Mary Perloe, MS, GNP at the Georgia Medical Care Foundation, with the support of a contract from the Centers for Medicare and Medicaid Services (CMS).

Project Description: INTERACT (Interventions to Reduce Acute Care Transfers) is a quality improvement program focusing on the management of changes in a resident's condition, with the goal of stabilizing the patient and avoiding transfer to an acute care facility. The program includes clinical and educational tools and strategies for use in everyday practice within long-term care facilities. The current version of the INTERACT Program was developed by the INTERACT interdisciplinary team under the leadership of Dr. Ouslander, MD, with input from many direct care providers and national experts in projects based at Florida Atlantic University (FAU) and supported by the Commonwealth Fund. This DSRIP project will further increase the impact of INTERACT by integrating INTERACT 3.0 tools into SNF health information technology through a standalone or integrated clinical decision support system.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.
2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.
3. ~~Develop~~ Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.
4. Educate all staff on care pathways and INTERACT principles.
5. ~~Develop~~ Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.
6. Create coaching program to facilitate and support implementation.
7. Educate patient and family/caretakers, to facilitate participation in planning of care.
8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.
9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.
10. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project

Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of SNFs participating in the INTERACT program by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
SNFs participating in the INTERACT program	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Hospitals			
Skilled Nursing Facilities/Nursing Homes			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all SNFs participating in the INTERACT program will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all SNFs participating in the INTERACT program will meet all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who avoided nursing home to hospital transfer, attributable to INTERACT principles as established within the project requirements.

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related initiative related to this project's objective?

Yes	No

If yes: Please identify the initiatives in which the provider is participating in the tablePlease identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project

Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.viii Hospital-Home Care Collaboration Solutions

Project Objective Implementation of INTERACT-like program in the home care setting to reduce risk of re-hospitalizations for high risk patients.

Project Description: Many patients who previously were transferred to skilled nursing facilities (SNFs) are now being discharged to less restrictive alternative locations, primarily home-based. Aside from the many benefits of returning to a known and personal setting, there are the risks of potential non-compliance to discharge regimens, missed provider appointments, and less frequent observation of an at-risk person by medical staff. This project will put services in place to address these risks by matching services with transition care management. Services are expected to last more than 30 days.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.
2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.
3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.
4. Educate all staff on care pathways and INTERACT-like principles.
5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.
6. Create coaching program to facilitate and support implementation.
7. Educate patient and family/caretakers, to facilitate participation in planning of care.
8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management.
9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.
10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.
11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.
12. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of home care facilities participating in INTERACT program by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Home care facilities participating in INTERACT program	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Behavioral Health			
Substance Abuse			
Skilled Nursing Facilities/Nursing Homes			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application

will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all home care facilities participating in the INTERACT program will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics..~~Please indicate the Demonstration Year~~Demonstration Year (DY) and Quarter by which all home care facilities participating in the INTERACT program will meet all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										

% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who avoided home care to hospital transfer, attributable to INTERACT-like principles, as established within the project requirements.

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system initiative or are expected to be involved in during the life of the DSRIP program related ~~reform initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

~~b.~~ **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.b.ix Implementation of Observational Programs in Hospitals

Project Objective: This project will reduce inpatient admissions vis-à-vis the creation of dedicated observation (OBS) units for patients presenting to emergency departments (EDs) whose need for inpatient services is not clearly defined or who need limited extended services for stabilization and discharge.

Project Description: While observation beds are not new to hospitals, the goal of this project is to bring care coordination services to the unit in order to ensure continuity of care with community services. Short stay hospitalizations are often related to ambulatory-sensitive diagnoses. These admissions can be avoided with improved access to primary care and behavioral health services, as well as with compliance to evidence-based clinical guidelines by the practitioner and patient. Health literacy, community values, and language may be barriers to connectivity of the patient with necessary health care services. Appropriate communication may assist with removing these barriers.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Establish appropriately sized and staffed observation (OBS) units in close proximity to ED services, unless the services required are better provided in another unit. When the latter occurs, care coordination must still be provided.
2. Create clinical and financial model to support the need for the unit.
3. Utilize care coordination services to ensure safe discharge either to the community or a step down level of service, such as behavioral health or assisted living/SNF.
4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
5. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. ~~Please indicate the total number of hospitals the PPS intends to include in the project by the end of Demonstration Year~~~~Demonstration Year (DY) 4, or sooner as applicable.~~ Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the

end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Project Scale~~	~~Number Total Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Hospitals participating in project~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Hospitals		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Skilled Nursing Facilities/Nursing Homes		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Skilled Nursing Facilities/Nursing Homes			
All Other			

**Based on Department of Health Safety Net Provider designation*

a.b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following informationDSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating Hospitals participating in project will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and MetricsPlease indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all hospitals participating in the project will meet all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

a.b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and

100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) 1, 50% by the end of ~~Demonstration year~~Demonstration Year (DY) 2, etc.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who are utilizing the OBS services that meet project requirements. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related ~~initiative related~~ to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within

the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.c.i To Develop a Community Based Health Navigation Service to Assist Patients to Access Healthcare Services Efficiently

Project Objective: This project will develop community-based health navigation services to assist patients in accessing healthcare services efficiently.

Project Description: Health literacy, community values, language barriers, and lack of engagement with community health care services can result in avoidable use of hospital services. People who do not understand how to access and use the healthcare system cannot be expected to use it effectively. This project is focused on persons utilizing the system but doing so ineffectively or inappropriately. The intended navigation services will provide bridge support until the patient has the confidence to self-manage his/her health. These community resources will not necessarily be licensed health care providers, but persons trained to understand and access the community care system. For example, navigators will assist patients with scheduling appointments and obtaining community services. Navigators will be resourced in-person, telephonically, or online; they will also have access to language services and low literacy educational materials.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.
2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.
3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.
4. Resource appropriately for the community navigators, evaluating placement and service type.
5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.
6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.
7. Market the availability of community-based navigation services.
8. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*.~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of community-based navigators the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Community-based navigators participating in project	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

~~a.~~b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. **Speed of Implementation/Patient Engagement (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating c~~C~~ommunity-based navigators ~~participating in project~~ will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all community-based navigators participating in the project will meet all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients										

~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients assisted by community navigators (in-person, telephonic, or web-based).

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

2.c.ii Expand Usage of Telemedicine in Underserved Areas to Provide Access to Otherwise Scarce Services

Project Objective: This project will use telecommunication to create access to services otherwise not accessible due to patient characteristics, travel distance or specialty scarcity.

Project Description: Patients may not have access to needed healthcare services due to patient characteristics, travel distance, and/or specialty scarcity. With the emphasis that NYS has placed on EHR and HIE connectivity, as well as other advances in telehealth, these needed services can now be made available to more patients. Telemedicine is using interactive telecommunications equipment to support direct, active communication between providers and patients. This telemedicine project is meant to address home-based telemedicine for chronic disease management and/or specialty scarcity, such as services for AIDS/HIV, adult psychiatry. Implementation will is intended to meet an unmet service need; this project is not intended to be a convenience service for the member or provider where access is otherwise available.

Telemedicine capabilities have been used to increase primary care provider and other medical personnel's expertise through programs such as Project Echo (echo.unm.edu). Modeling of Project Echo, where appropriate, is encouraged.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement telemedicine services, aimed at reducing avoidable hospital use by increasing patient access to services not otherwise available and/or increasing specialty expertise of primary care providers and their staff in order to increase availability of scarce specialty services.
2. Provide equipment specifications and rationale for equipment choice (including cost of acquisition, maintenance and sustainability of service).
3. Define service area and participating providers, with clear delineation between telemedicine hub sites versus spoke sites.
4. Procure service agreements for provision of telemedicine services such as specialty services, participating primary care and nurse triage monitoring.
5. Develop standard service protocols, as well as consent and confidentiality standards meeting all federal and state requirements.
6. Coordinate with Medicaid Managed Care Organizations to develop and ensure service authorization and payment strategies are in place to support sustainability of patient care uses.
7. Use EHRs and other technical platforms to track all patients engaged in the project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of providers (including "hub" and "spoke" sites) the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Numbe~~Total~~r~~ Committed
Providers ("hub" sites) participating in project	
Providers ("spoke" sites) participating in project	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Skilled Nursing Facilities/Nursing Homes			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY) 4~~.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating providers (including "hub" and "spoke" sites) ~~participating in project~~ will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

   PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
   ~~Please indicate the Demonstration Year~~Demonstration Year (DY) and Quarter by which all providers (including "hub" and "spoke" sites) participating in the project will meet all project requirements.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) 1, 50% by the end of Demonstration year~~Demonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients										

~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients who receive telemedicine consultations.

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards scale of project implementation, completion of project requirements and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

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

In order to be eligible for this project, a PPS must already be pursuing 10 projects, demonstrate its network capacity to handle an 11th project, and evaluate that the network is in a position to serve uninsured (UI), non-utilizing (NU), and low utilizing (LU) populations. Any public hospital in a specified region has first right of refusal for implementing this 11th project. Only the uninsured, non-utilizing, low-utilizing Medicaid member populations will be attributed to this project. Finally, in order to participate in pay-for-reporting outcome metrics in ~~DSRIP Year~~Demonstration Years (DY)~~s~~ 4 and 5, the PPS will submit data as specified.

Project Objective: The objective of this 11th project is to address Patient Activation Measures® (PAM®) so that UI, NU, and LU populations are impacted by DSRIP PPS' projects. Feedback from the public comment period resulted in the state to include UI members in DSRIP, so that this population benefits from a transformed healthcare delivery system. Please refer to the body of literature found below on patient activation and engagement, health literacy, and practices to reduce health care disparities:

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1955271/
http://content.healthaffairs.org/content/32/2/223.full
http://www.hrsa.gov/publichealth/healthliteracy/
http://www.health.gov/communication/literacy/
http://www.ama-assn.org/ama/pub/about-ama/ama-foundation/our-programs/public-health/health-literacy-program.page
http://www.hrsa.gov/culturalcompetence/index.html
http://www.nih.gov/clearcommunication/culturalcompetency.htm

Project Description: This project is focused on persons not utilizing the health care system and works to engage and activate those individuals to utilize primary and preventive care services. The PPS will be required to formally train on PAM®, along with baselining and regularly updating assessments of communities and individual patients. This project encapsulates three primary concepts, which drive the requirements for this project:

- Patient activation
- Financially accessible health care resources
- Partnerships with primary and preventive care services

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Contract or p~~P~~artner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.

2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.
3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or p~~P~~artner with CBOs to perform outreach within the identified "hot spot" areas.
4. Survey the targeted population about healthcare needs in the PPS' region.
5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.
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).
   - 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.
   - 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.
7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.
8. Include beneficiaries in development team to promote preventive care.
9. Measure PAM® components, including:
   - 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.
   - 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® survey and designate a PAM® score.
     - Individual member score must be averaged to calculate a baseline measure for that year's cohort.
     - The cohort must be followed for the entirety of the DSRIP program.
   - 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.
   - If the beneficiary is deemed to be LU & 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.
     - The PPS will NOT be responsible for assessing the patient via PAM® survey.
     - PPS will be responsible for providing the most current contact information to the beneficiary's MCO for outreach purposes.
   - Provide member engagement lists to relevant insurance companies (for NU & LU populations) on a monthly basis, as well as to DOH on a quarterly basis.
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.

11. Contract or p~~P~~artner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage community health care resources (including for primary and preventive services) and patient education.
12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.
13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.
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 health care services and resources.
15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.
16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.
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.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. The project description should consider three primary activation concepts: *patient activation*, *financially accessible health care resources*, and *partnerships with primary and preventive care services.*

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population. ~~define the target patient population that will be impacted by this project.~~ Note: Only the uninsured, non-utilizing, low-utilizing Medicaid member populations will be attributed to this project. ~~Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. Please demonstrate that the PPS has network capacity to handle an 11th project and how the PPS is in a position to serve these UI, NU and LU populations. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of individuals trained in PAM® or other patient activation techniques the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Expected # of individuals trained in PAM® or other patient activation techniques	

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)

Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of uninsured (UI), non-utilizer (NU) and low utilizer (LU) populations PPS intends to actively engage and provide services to through this project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4. ~~.~~This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4

Patient Scale	Commitment
Target Uninsured Population to Benefit from the Project	
Target Non-Utilizer Population to Benefit from the Project	
Target Low Utilizer Population to Benefit from the Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information~~.

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating individuals trained in PAM® or other patient activation techniques will achieve project requirements. Project speed is measured by how fast all the project requirements for all chosen locations are met.

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics~~Please indicate the Demonstration Year~~~~Demonstration Year (DY) and Quarter by which all individuals trained in PAM® and other patient activation techniques in the project will meet all project requirements~~.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc~~.

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of *Actively Engaged* Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients *Actively Engaged* ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of individuals who completed PAM® or other patient engagement techniques~~and have an established patient activation score~~.

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan ~~PPS~~ currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards scale of project implementation, completion of project requirements and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the

project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.a.i Integration of Primary Care and Behavioral Health Services

Project Objective: Integration of mental health and substance abuse with primary care services to ensure coordination of care for both services.

Project Description: Integration of behavioral health and primary care services can serve 1) to identify behavioral health diagnoses early, allowing rapid treatment, 2) to ensure treatments for medical and behavioral health conditions are compatible and do not cause adverse effects, and 3) to de-stigmatize treatment for behavioral health diagnoses. Care for all conditions delivered under one roof by known healthcare providers is the goal of this project.

The project goal can be achieved by 1) integration of behavioral health specialists into primary care clinics using the collaborative care model and supporting the PCMH model, or 2) integration of primary care services into established behavioral health sites such as clinics and Crisis Centers. When onsite coordination is not possible, then in model 3) behavioral health specialists can be incorporated into primary care coordination teams (see project IMPACT described below).

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

There are three project areas outlined in the list below. Performing Provider Systems (PPSs) may implement one, two, or all three of the initiatives if they are supported by the Community Needs Assessment.
Any PPS undertaking one of these projects is recommended to review the resources available at http://www.integration.samhsa.gov/integrated-care-models.

A. *PCMH Service Site:*
   1. Co-locate behavioral health services at primary care practice sites. All participating p~~P~~rimary care ~~practices~~ providers must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by ~~DY~~Demonstration Year (DY) 3.
   2. Develop collaborative evidence-based standards of care including medication management and care engagement process.
   3. Conduct preventive care screenings, including behavioral health screenings (PHQ-9, SBIRT) implemented for all patients to identify unmet needs.
   4. Use EHRs or other technical platforms to track all patients engaged in this project.

B. *Behavioral Health Service Site:*
   1. Co-locate primary care services at behavioral health sites.
   2. Develop collaborative evidence-based standards of care including medication management and care engagement process.

3. Conduct preventive care screenings, including behavioral health screenings (PHQ-9, SBIRT) implemented for all patients to identify unmet needs.
4. Use EHRs or other technical platforms to track all patients engaged in this project.

C. *IMPACT:* This is an integration project based on the Improving Mood - Providing Access to Collaborative Treatment (IMPACT) model. IMPACT Model requirements include:
1. Implement IMPACT Model at Primary Care Sites.
2. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.
3. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.
4. Designate a Psychiatrist meeting requirements of the IMPACT Model.
5. Measure outcomes as required in the IMPACT Model.
6. Provide "stepped care" as required by the IMPACT Model.
7. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the total number of PCP sites, behavioral health provider sites, substance abuse provider sites, and all other sites the PPS intends to include in the project by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Expected # of PCPs~~			
~~Expected # of Behavioral Health Sites~~			
~~Expected # of Substance Abuse Sites~~			
~~Expected # of All Other Provider Sites~~			

~~**Based on Department of Health Safety Net Provider designation*~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Behavioral Health		
Substance Abuse		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Behavioral Health			
Substance Abuse			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

~~a.~~b. Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all sites participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.
~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
~~Expected #~~Number of *Actively Engaged* Patients										

~~Targeted Population~~Expected # of *Actively Engaged* Patients										
% of Patients that are *Actively Engaged*										

**For this project, Actively Engaged is defined as the total of number of patients engaged per each of the three models in this project, including:*

A. *PCMH Service Site: Number of patients screened (PHQ-9 / SBIRT)*
B. *Behavioral Health Site: Number of patients receiving primary care services at a participating mental health or substance abuse site.*
C. *IMPACT: Number of patients screened (PHQ-9 / SBIRT)*

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? *(Please mark the appropriate box below)*

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**
Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.a.ii Behavioral Health Community Crisis Stabilization Services

Project Objective: To provide readily accessible behavioral health crisis services that will allow access to appropriate level of service and providers, supporting a rapid de-escalation of the crisis.

Project Description: Routine emergency departments and community behavioral health providers are often unable to readily find resources for the acutely psychotic or otherwise unstable behavioral health patient. This project entails providing readily accessible behavioral health crisis services that will allow access to appropriate level of service and providers, supporting a rapid de-escalation of the crisis. The Behavioral Health Crisis Stabilization Service provides a single source of specialty expert care management for these complex patients for observation monitoring in a safe location and ready access to inpatient psychiatric stabilization if short term monitoring does not resolve the crisis. A mobile crisis team extension of this service will assist with moving patients safely from the community to the services and do community follow-up after stabilization to ensure continued wellness.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.
2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.
3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.
4. Develop written treatment protocols with consensus from participating providers and facilities.
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.
6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).
7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.
8. Ensure that all PPS safety net providers are actively~~Share~~ connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including ~~Direct~~direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.
10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.
11. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources **(1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:
~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number sites the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Number Committed
~~Sites participating in project~~Expected Number of Crisis Intervention Programs Established	

Please identify the number of committed providers who are a part of the local Safety Net.~~**Based on Department of Health Safety Net Provider designation*~~

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. **Speed of Implementation/Patient Engagement (Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as participating patients receiving crisis stabilization services from participating sites, as determined in the project requirements.*
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial

Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.a.iii Implementation of Evidence-Based Medication Adherence Program in Community Based Sites for Behavioral Health Medication Compliance

Project Objective: To assist patients who have difficulty with medication adherence to improve compliance with medical regimens.

Project Description: Medication adherence is particularly important for persons with psychiatric conditions to maintain health and function. This program is based upon shared decision-making and behavior modification to effect sustained change. Tools in the New York City Department of Health and Mental Hygiene's and the Fund for Public Health NY's Medication Adherence Project (MAP), while not originally focused on behavioral health, would be useful to form the basis of this intervention. Other evidence based tools and educational materials may be used. Various factors influence "non-compliance" including health literacy, cultural values, language, and side effects of treatment. The goal of this program is to assist patients identify these issues and resolve them with motivational interviewing and structured conversations around medication compliance.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Develop a medication adherence program to improve behavioral health medication compliance through culturally-competent health literacy initiatives including methods based on the Fund for Public Health NY's Medication Adherence Project (MAP).
2. Form care teams including practitioners, care managers including Health Home care managers, social workers and pharmacists who are engaged with the behavioral health population.
3. Use EHRs or other technical platforms to track all patients engaged in this project.
4. Coordinate with Medicaid Managed Care Plans to improve medication adherence.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources **(1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to~~

~~repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*~~.

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of PCP sites, behavioral health provider sites, substance abuse provider sites, and all other sites by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Number Committed
Expected # of PCPs	

Expected # of Behavioral Health Sites	
Expected # of Substance Abuse Sites	
Expected # of All Other Provider Sites	

~~*Based on Department of Health Safety Net Provider designation~~

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active

engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

   PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~Speed of Implementation/Patient Engagement (Total Possible Points - 40):~~

~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all sites participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as the number of participating patients receiving services from participating providers with documented self-management goals in medical record (diet, exercise, medication management, nutrition, etc.).*
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within

the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**
Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.a.iv Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal services) Capabilities and Appropriate Enhanced Abstinence Services within Community-Based Addiction Treatment Programs

Project Objective: To develop withdrawal management services for substance use disorders (SUD) (ambulatory detoxification) within community-based addiction treatment programs that provide medical supervision and allow simultaneous or rapid transfer of stabilized patients into the associated SUD services, and to provide/link with care management services that will assist the stabilizing patient to address the life disruption related to the prior substance use.

Project Description: The majority of patients seeking inpatient detoxification services do not require the intensive monitoring and medication management available in the inpatient setting. These patients can be monitored in an outpatient program until stability is assured and, then, rapidly integrated into a co-located outpatient SUD program with PCP integrated team. Additionally, patients will be provided with care management services that will assist the stabilizing patient to organize medical, educational, legal, financial, social, family and childcare services in support of abstinence and improved function within the community. Care management can be provided as part of the SUD program or through a Health Home strongly linked to the SUD program if qualified for Health Home services. Such programs can address alcohol, sedative and opioid dependency as well as provide access to ongoing medication management treatment.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Develop community-based addiction treatment programs focusing on withdrawal management that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.
2. Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.
3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.
4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.
5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and staff training.
6. Develop care management services within the SUD treatment program.
7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.

8. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~**Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*.~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the total number of behavioral health provider sites, substance abuse provider sites, and all other sites the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable. This number should be entered in the table as *Total Committed*.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Expected # of PCPs~~			
~~Expected # of Behavioral Health Sites~~			
~~Expected # of Substance Abuse Sites~~			
~~Expected # of All Other Provider Sites~~			

~~**Based on Department of Health Safety Net Provider designation*~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Hospitals		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) ~~4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all sites participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. ~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~ Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

**For this project, Actively Engaged is defined as the number of patients who have received outpatient withdrawal management services at participating sites.*

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.a.v Behavioral Interventions Paradigm (BIP) in Nursing Homes

Project Objective: To reduce transfer of patients from a SNF facility to an acute care hospital by early intervention strategies to stabilize patients with behavioral health issues before crisis levels occur.

Project Description: Many patients in long term care have behavioral health issues as a primary disease or as the result of other ongoing chronic diseases. Despite the prevalence of such problems within the SNF, staff may have inadequate formal training to manage these problems or rely on medication to manage these patients. These patients are a significant cause of avoidable admissions and readmissions to hospitals from SNF. This program provides a pathway to avoid these transfers and to ensure better care for the SNF patient with these diagnosis. Interventions that rely on increased training of the usual care staff to identify and address behavioral health concerns have been found to be effective management tools.
Resources from other evidence based SNF initiatives to reduce avoidable hospital admissions, e.g., INTERACT (http://interact2.net/index.aspx) may be integrated into this program.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement BIP Model in Nursing Homes model using SNF skilled nurse practitioners (NP) and psychiatric social workers to provide early assessment, reassessment, intervention, and care coordination for at risk residents to reduce the risk of crisis requiring transfer to higher level of care.
2. Augment skills of the clinical professionals in managing behavioral health issues.
3. Enable the non-clinical staff to effectively interact with a behavioral population.
4. Assign a NP with Behavioral Health Training as a coordinator of care.
5. Implement a Behavior Management Interdisciplinary Team Approach to care.
6. Implement a medication reduction and reconciliation program.
7. Increase the availability of psychiatric and psychological services via telehealth and urgently available providers.
8. Provide holistic psychological Interventions.
9. Provide enhanced recreational services.
10. Develop crisis intervention strategies via development of an algorithm for staff intervention and utilization of sitter services.
11. Improve documentation and communication re: patient status.
12. Modify the facility environment.
13. Form agreements with the Medicaid Managed Care organizations (including MLTC and FIDA plans) serving the affected population to provide coverage for the service array under this project.
14. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources **(1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*~~.

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those

projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the number of total licensed beds in participating facilities that the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable. This number should be entered in the table as *Total Committed*.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of total licensed beds in participating facilities~~			

Project Scale	Total Committed (10 Points)	Number in Network
Non-PCP Practitioners		
Behavioral Health		
Skilled Nursing Facilities/Nursing Homes		
All Other		

~~**Based on Department of Health Safety Net Provider designation*~~
Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Non-PCP Practitioners			
Behavioral Health			
Skilled Nursing Facilities/Nursing Homes			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively*

Engaged Patients. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all skilled nursing facilities in the project will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all skilled nursing facilities in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients

will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as the number of participating patients impacted by program initiatives (bed census).*
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics.

Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.b.i Evidence-Based Strategies for Disease Management in High Risk/Affected Populations (Adults Only)

Project Objective: To support implementation of evidence-based best practices for disease management in medical practice for adults with cardiovascular conditions. (Adults Only).

Project Description: The goal of this project is to ensure clinical practices in the community and ambulatory care setting use evidence based strategies to improve management of cardiovascular disease. These strategies are focused on improving practitioner population management, adherence to evidence-based clinical treatment guidelines, and the adoption of activities that will increase patient self-efficacy and confidence in self-management. Strategies from the Million Hearts Campaign (http://millionhearts.hhs.gov) are strongly recommended.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones & Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.
2. Ensure that all PPS safety net providers are actively~~Actively~~ ~~share~~ connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including ~~Direct~~direct exchange (secure messaging), alerts and patient record look up~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
4. Use EHRs or other technical platforms to track all patients engaged in this project.
5. Use the EHR or other technical platform to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).
6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.
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.
8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.
9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.
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.

Improve Medication Adherence:

11. Prescribe once-daily regimens or fixed-dose combination pills when appropriate.

Actions to Optimize Patient Reminders and Supports:

12. Document patient driven self-management goals in the medical record and review with patients at each visit.
13. Follow up with referrals to community based programs to document participation and behavioral and health status changes
14. Develop and implement protocols for home blood pressure monitoring with follow up support.
15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.
16. Facilitate referrals to NYS Smoker's Quitline.
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.
18. Adopt strategies from the Million Lives Campaign.
19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.
20. Engage a majority (at least 80%) of primary care ~~practices~~ providers in this project.

Partners Participating in this Project

Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project.~~

~~Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*.~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of PCPs the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~PCPs participating in project~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

Please note: The threshold for the implementation of disease management evidence-based best practices requires 80% PCP engagement.

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating PCPs will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all PCPs participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)	DY1	DY2	DY3	DY 4

	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as the number of participating patients receiving services from participating providers with documented self-management goals in medical record (diet, exercise, medication management, nutrition, etc.).*

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards scale of project implementation, completion of project requirements and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.b.ii Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only)

Project Objective: Engage at-risk population in primary and secondary disease prevention strategies related to cardiovascular health.

Project Description: While Project 3.b.i is focused on practice improvement in the management of cardiovascular health, this project focuses on developing community resources to assist patients with primary and secondary preventive strategies to reduce risk factors and ameliorate the long-term consequences of cardiovascular diseases and other associated chronic diseases.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement or expand evidence-based self-management programs such as the Stanford Chronic Disease Self-Management Program (CDSMP) to address chronic disease specific to cardiovascular diseases.
2. Establish protocols to refer patients with hypertension or at high risk for onset of hypertension to community-based self-management programs.
3. Monitor progress of referred patients and make ongoing recommendations with community-based self-management programs.
4. Ensure comprehensive nutrition standards to improve the nutritional quality of foods served, including reducing sodium, for PPS' that that serve food to employees, patients, and/or the public.
5. Develop Health Home patient referral protocols to ensure patients receive the appropriate level of care management.
6. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~**Project Description and Justification**~~**Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to~~

repurpose existing resources to meet the needs of the community. Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population you expect to engage expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:
DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

Please indicate the total number of sites with evidence based self-management program to include in the project by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable.

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of sites with evidence based self-management program~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites with evidence based self-management programs will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all sites with evidence based self-management program participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4

All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2~~DY2~~		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of patients participating in programs at project sites.

Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015 PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the

project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.c.i ~~Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only)~~Evidence based strategies for disease management in high risk/affected populations. (A~~a~~dult only)

Project Objective: Support implementation of evidence-based best practices for disease management in medical practice related to diabetes.

Project Description: The goal of this project is to ensure clinical practices in the community and ambulatory care setting use evidence based strategies to improve management of diabetes. Specifically, this includes improving practitioner population management, increasing patient self-efficacy and confidence in self-management, and implementing diabetes management evidence based guidelines.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement evidence based best practices for disease management, specific to diabetes, in community and ambulatory care settings.
2. Engage at least 80% of primary care ~~practices~~ providers within the PPS in the implementation of disease management evidence-based best practices.
3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.
4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.
6. Use EHRs or other technical platforms to track all patients engaged in this project.
7. Meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3 for EHR systems used by participating safety net providers.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the total number of participating primary care providers the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of participating primary care providers~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			

Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

Please note: The threshold for the implementation of disease management evidence-based best practices requires 80% PCP engagement.

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) 4.

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement **(Total Possible Points - 40):**
DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating primary care providers will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration Year~~Demonstration Year (DY) ~~and Quarter by which all participating primary care providers in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for -achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~**Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year**~~**Demonstration Year (DY) 1, 50% by the end of Demonstration ~~year~~Demonstration Year (DY) 2, etc.**

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2 ~~DY2~~		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients with at least one hemoglobin A1c test within previous ~~DSRIP year~~Demonstration Year (DY).
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015 PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.c.ii Implementation of Evidence-Based Strategies in the Community to Address Chronic Disease—Primary and Secondary Prevention Projects (Adults Only)

Project Objective: Engage at-risk populations in primary and secondary disease prevention strategies to improve patient self-efficacy and self-management.

Project Description:
While Project 3.c.i is focused on diabetes care practice improvement, this project focuses on developing community resources to assist patients with primary and secondary preventive strategies to reduce risk factors for diabetes, and ameliorate the long-term consequences of diabetes and other co-occurring chronic diseases.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement Center for Disease Control (CDC)-recognized National Diabetes Prevention Programs (NDPP) and/or create partnerships with community sites to refer patients to CDC-recognized programs.
2. Use EHRs or other technical platforms to track all patients engaged in this project.
3. Identify high-risk patients (including those at risk for onset of diabetes or with pre-diabetes) and establish referral process to institutional or community NDPP delivery sites.
4. Ensure collaboration with PCPs and program sites to monitor progress and provide ongoing recommendations.
5. Establish lifestyle modification programs including diet, tobacco use, and exercise and medication compliance.
6. Ensure coordination with Medicaid Managed Care organizations and Health Homes for eligible/involved patients.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example,~~

please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community. Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population you expect to engage expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of sites with evidence based self-management program the PPS intends to include in the project by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of sites with evidence based self-management program~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			

Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites with evidence based self-management programs will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all sites with evidence based self-management program participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2~~DY2~~		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients participating in programs at project site.
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015 PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.d.i Development of Evidence Based Medication Adherence Programs (MAP) in Community Settings – Asthma Medication

Project Objective: Improve patient compliance with medical regimens by integrating evidence-based solutions into the provider system.

Project Description: The goal of this program is to develop an evidence based medication adherence program specific to asthma medication to assist patients with structured conversations around medication adherence and compliance. Various factors influence non-compliance including, health literacy, cultural values, language, and side effects of treatment. This project is based upon the NYC Department of Health and Mental Hygiene's and the Fund for Public Health NY's Medication Adherence Project. MAP Methodology and training guides are available below:

- http://fphny.org/programs/medication-adherence-project and the NYCDHMH medication adherence program:
- http://www.nyc.gov/html/doh/downloads/pdf/cardio/cardio-map-tools-manual.pdf.
  Please note: Other evidence based tools may also be used

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Implement a medication adherence project (MAP) specific to asthma medication in participating PCP and community settings.
2. Use EHRs or other technical platforms to track all patients engaged in this project.
3. Identify and engage care teams, including primary care and specialist practitioners, care managers (including Health Home care managers), social workers, and pharmacists to deliver services to patients with asthma health issues.
4. Ensure coordination with Medicaid Managed Care organizations.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~.

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of PCP sites and all other community provider sites the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of PCP sites and all other community provider sites~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Pharmacy			
Community Based Organizations			

All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.
~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating PCP sites and community provider sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all PCP sites and all community provider sites participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) ~~1, 50% by the end of Demonstration year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2~~DY2~~		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients receiving these services from providers at participating sites.
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015 PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation

Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.d.ii Expansion of Asthma Home-Based Self-Management Program

Project Objective: Implement an asthma self-management program including home environmental trigger reduction, self-monitoring, medication use, and medical follow-up to reduce avoidable ED and hospital care.

Project Description: Despite best efforts of practitioners to implement evidence based practices, patients continue to have difficulty controlling their symptoms. The goal of this project is to develop home-based services to address asthma exacerbation factors. Special focus will be emphasized on children, where asthma is a major driver of avoidable hospital use.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.
2. Establish procedures to provide, coordinate, or link the client to resources for evidence based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce exposure to asthma triggers such as pests, mold, and second hand smoke.
3. Develop and implement evidence based asthma management guidelines.
4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.
5. Ensure coordinated care for asthma patients includes social services and support.
6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.
7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.
8. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project

Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding~~

~~than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the total number of home care or other community-based providers the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of home care or other community-based providers~~			

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Pharmacy		
Community Based Organizations		
All Other		

~~**Based on Department of Health Safety Net Provider designation*~~
Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating home care and other community-based providers will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all home care or other community-based providers participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)	DY1	DY2	DY3	DY 4

	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.
~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration year~~Demonstration Year (DY) 1, 50% by the end of Demonstration ~~year~~Demonstration Year (DY) ~~2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	**DY0 (Baseline)**		**DY1**		**DY2**		**DY3**		**DY 4**	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients based on home assessment log, patient registry, or other IT platform.
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015 PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.d.iii Implementation of Evidence Based Medicine Guidelines for Asthma Management

Project Objective: Implement evidence based medicine guidelines for asthma management to ensure consistent care.

Project Description: The goal of this project is to implement asthma management practice guidelines, develop asthma action plans, and increase access to pulmonary and allergy specialists in areas of New York State.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

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.
2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.
3. Deliver educational activities addressing asthma management to participating primary care providers.
4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.
5. Use EHRs or other technical platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~**Project Description and Justification**~~**Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*~~.

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the total number of participating prescribing providers the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of participating prescribing providers~~			

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Pharmacy		
Community Based Organizations		
All Other		

~~*Based on Department of Health Safety Net Provider designation~~

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~a. Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) ~~4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	

Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating prescribing providers will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~

~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~a. Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all prescribing providers participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~b. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

For this project, Actively Engaged is defined as the number of participating patients with asthma action plan.
Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

4. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within

the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By March 1,~~April~~ 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.e.i Comprehensive Strategy to Decrease HIV/AIDS Transmission to Reduce Avoidable Hospitalizations—Development of Center of Excellence for Management of HIV/AIDS

Project Objective: To work towards reducing transmission of AIDS and ending the AIDS epidemic in New York State by the end of 2024.

Project Description: There are effective strategies to manage viral loads of HIV, slow progression of the disease and reduce transmission. These strategies need to be available to all persons currently infected with HIV and all persons at risk for HIV infection. HCV infection can also be addressed in this scenario.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements. A performing provider system that has identified HIV/AIDS as a significant issue within their community may choose to implement one of the two models below.

Model 1: Early Access to and Retention in HIV and HCV Care -Scatter Model

1. Develop a consulting/referral/educational relation with a Center of Excellence (COE) for management of HIV/AIDS that ensures early access to and retention in HIV and HCV Care – Scatter Model; ensure medical and behavioral health consultation expertise are available.
2. Identify primary care providers who have significant case loads of patients infected with HIV.
3. Implement training for primary care providers which will include consultation resources from the center of excellence.
4. Develop coordination of care services with behavioral health and social services within or linking with the primary care providers' offices.
5. Ensure systems are in place that address patient linkage to care, ensure follow-up and retention in care, and promote adherence to medication management, monitoring and other requirements of evidence based practice for management of HIV/AIDS.
6. Institute a system to monitor quality of care with educational services where gaps are identified.
7. Use EHRs or other technical platforms to track all patients engaged in this project.

Model 2: Center of Excellence Management for HIV/AIDS (including HCV)

1. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).
2. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment.
3. Co-locate care management services including Health Home care managers for those eligible for Health Homes.
4. Develop a referral process and connectivity for referrals for those persons who qualify for but are not yet in a Health Home.

5. Ensure understanding and compliance with evidence based guidelines for management of HIV/AIDS (and HCV).
6. Ensure coordination of care between all available services preferably through a single electronic health/medical/care management record.
7. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms 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~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
8. Ensure that EHR systems or other IT platforms used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
9. Use EHRs or other IT platforms to track all patients engaged in this project.
10. Seek designation as a Center of Excellence from the New York State Department of Health.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:

~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.
~~Please indicate the number of PCPs partnering with a Center of Excellence, or number of COEs to be created (depending on model chosen), that the PPS intends to include in the project by the end of Demonstration Year~~Demonstration Year (DY) ~~4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of PCPs/COE(s)~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Health Home/Care Management		
Behavioral Health		
Substance Abuse		
Pharmacy		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~a. Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating PCPs partnering with a Center of Excellence, or for newly formed COEs (depending on model chosen) will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all project requirements will have been met for participating PCPs partnering with a Center of Excellence, or for newly formed COEs (depending on model chosen).~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~a. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

**For this project, Actively Engaged is defined as the Number of participating patients who received at least four anti-viral prescription scripts within the previous ~~DSRIP year~~Demonstration Year (DY). Please*

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.

~~3.~~4. Project Resource Needs and Other Initiatives (1000 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

~~b.~~ **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.f.i Increase Support Programs for Maternal and Child Health (Including High Risk Pregnancies)

Project Objective: To reduce avoidable poor pregnancy outcomes and subsequent hospitalization as well as improve maternal and child health through the first two years of the child's life.

Project Description: High risk pregnancies do not end with the birth of the child, but can continue with high risk parenting situations. Women with high risk pregnancies due to age, social situation or concurrent medical or behavioral health conditions may need significant support beyond obstetrical care to grow a healthy child. Nuclear families and single mothers may not have access to functional parenting skill advice to assist them in the crucial first two years of a child's life.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

For performing partner systems where the community assessment identifies significant high risk obstetrical/parenting cases, there are **three models** for intervention that may be utilized for this project. Systems should choose one primary project but may also choose requirements from the other two projects to add as part of their project.

Model 1: Implementation of an evidence-based home visiting model for pregnant high risk mothers including high risk first time mothers. Potential programs include Nurse Family Partnership.

1. Implement an evidence-based home visitation model, such as the Nurse Family Partnership, for pregnant high-risk mothers including high-risk first time mothers.
2. Develop a referral system for early identification of women who are or may be at high risk.
3. Establish a quality oversight committee of OB/GYN and primary care providers to monitor quality outcomes and implement new or change activities as appropriate.
4. Use EHRs or other technical platforms to track all patients engaged in this project.

Model 2: Establish a care/referral community network based upon a regional center of excellence for high risk pregnancies and infants.

1. Identify and engage a regional medical center with expertise in management of high risk pregnancies and infants (must have Level 3 NICU services or Regional Perinatal Center).
2. Develop a multidisciplinary team of experts with clinical and social support expertise who will co-manage care of the high risk mother and infant with local community obstetricians and pediatric providers.
3. Develop service MOUs between the multidisciplinary team and OB/GYN providers.
4. Utilize best evidence care guidelines for management of high risk pregnancies and newborns and implement uniform clinical protocols based upon evidence-based guidelines.

5. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms 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~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
6. Ensure that EHR systems or other IT platforms used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
7. Use EHRs or other IT platforms to track all patients engaged in this project.

Model 3: Implementation of a Community Health Worker (CHW) program on the model of the Maternal and Infant Community Health Collaboratives (MICHC) program.

1. Develop a Community Health Worker (CHW) program on the model of the Maternal and Infant Community Health Collaboratives (MICHC) program; access NYSDOH-funded CHW training program.
2. Employ a Community Health Worker Coordinator responsible for supervision of 4 – 6 community health workers. Duties and qualifications are per NYS DOH criteria.
3. Employ qualified candidates for Community Health Workers who meet criteria such as cultural competence, communication, and appropriate experience and training.
4. Establish protocols for deployment of CHW.
5. Coordinate with the Medicaid Managed Care organizations serving the target population.
6. Use EHRs or other IT platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Selection
For this project, one of the following three project models can be selected. Please indicate which of the three will be chosen:

- ☐ Model 1: Implementation of Nurse-Family Partnership program model for pregnant high risk first time mothers.
- ☐ Model 2: Establish a care/referral network based upon a regional center of excellence for high risk pregnancies and infants.
- ☐ Model 3: Implementation of a Community Health Worker (CHW) program on the model of the Maternal and Infant Community Health Collaborative (MICHC) program.

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:
   ~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those~~

~~projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the number of programs the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	Number Committed
Number of programs	

Please identify the number of committed providers who are a part of the local Safety Net.~~**Based on Department of Health Safety Net Provider designation*~~

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Hospice			
Community Based Organizations			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~b. Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~Demonstration Year (DY) ~~4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all programs will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all programs in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~c. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed ~~Patient Engagement Speed~~	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4

Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as number of expecting mothers and mothers participating in this program. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.*

~~3.~~4. Project Resource Needs and Other Initiatives (1000 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.g.i Integration of Palliative Care into the PCMH Model

Project Objective: To increase access to palliative care programs in PCMHs.

Project Description: Per the Center to Advance Palliative care, "Palliative care is specialized medical care for people with serious illnesses. It is focused on providing patients with relief from symptoms, pain, and stress of a serious illness—whatever the diagnosis. The goal is to improve quality of life for both the patient and the family. Palliative care is provided by a team of doctors, nurses, and other specialists who work together with a patient's other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment." (http://www.capc.org/building-a-hospital-based-palliative-care-program/case/definingpc)

Increasing access to palliative care programs for persons with serious illnesses and those at end of life can help ensure care and end of life planning needs are understood, addressed and met prior to decisions to seek further aggressive care or enter hospice. This can assist with ensuring pain and other comfort issues are managed and further health changes can be planned for.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Integrate Palliative Care into appropriate participating PCPs ~~primary care practices~~ that have, or will have, ~~-~~achieved NCQA PCMH certification.
2. Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into the practice.
3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility
4. Engage staff in trainings to increase role-appropriate competence in palliative care skills.
5. Engage with Medicaid Managed Care to address coverage of services.
6. Use EHRs or other IT platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria*.~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the number of participating PCMHs the PPS intends to include in the project by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of participating PCMHs~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Clinics		
Hospice		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Clinics			
Hospice			
Community Based Organizations			
All Other			

Based on Department of Health Safety Net Provider designation

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating PCMHs will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all PCMHs participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~a. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as number of participating patients receiving palliative care procedures at participating sites, as determined by the adopted clinical guidelines. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.*

~~3.~~4. Project Resource Needs and Other Initiatives (1000 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed

by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.g.ii Integration of Palliative Care into Nursing Homes

Project Objective: To increase access to palliative care programs in Nursing Homes.

Project Description: Per the Center to Advance Palliative Care, "Palliative care is specialized medical care for people with serious illnesses. It is focused on providing patients with relief from symptoms, pain, and stress of a serious illness—whatever the diagnosis. The goal is to improve quality of life for both the patient and the family. Palliative care is provided by a team of doctors, nurses, and other specialists who work together with a patient's other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment." (http://www.capc.org/building-a-hospital-based-palliative-care-program/case/definingpc)

Increasing access to palliative care programs for persons with serious illnesses and those at end of life can help ensure care and end of life planning needs are understood, addressed and met prior to decisions to seek further aggressive care or enter hospice. This can assist with ensuring pain and other comfort issues are managed and further health changes can be planned for.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Integrate Palliative Care into practice model of participating Nursing Homes.
2. Contract or d~~D~~evelop partnerships with community and provider resources, including Hospice, to bring the palliative care supports and services into the nursing home.
3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.
4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.
5. Engage with Medicaid Managed Care to address coverage of services.
6. Use EHRs or other IT platforms to track all patients engaged in this project.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. Scale of Implementation (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the total number of sites, programs and/or providers the PPS intends to include in the project by the end of Demonstration Year (DY), or sooner as applicable. These numbers should be entered in the table as *Total Committed*.

~~Please indicate the number of participating nursing homes the PPS intends to include in the project by the end of Demonstration YearDemonstration Year (DY) 4, or sooner as applicable.~~

~~Project Scale~~	~~Number Committed~~	~~Number of Safety Net Providers*~~	~~Percent of Safety Net Providers By County~~
~~Number of participating nursing homes~~			

~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Total Committed (10 Points)	Number in Network
Primary Care Physicians		
Non-PCP Practitioners		
Skilled Nursing Facilities/Nursing Homes		
Hospice		
Community Based Organizations		
All Other		

Please identify the number of committed providers who are a part of the local Safety Net.

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Skilled Nursing Facilities/Nursing Homes			
Hospice			
Community Based Organizations			
All Other			

Based on Department of Health Safety Net Provider designation

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.

~~Please indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration YearDemonstration Year (DY) 4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating nursing homes will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.

~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by all nursing homes participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.

~~a. Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as the number of participating patients receiving palliative care procedures at participating sites as determined by the adopted clinical guidelines. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.*

~~3.~~4. Project Resource Needs and Other Initiatives (1000 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed

by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

3.h.i Specialized Medical Home(s) for Chronic Renal Failure

Project Objective: To develop a comprehensive "one stop shopping" practice (or practices) to manage chronic renal failure.

Project Description: The prevention and management of renal failure requires early identification and implementation of evidence based care, close monitoring, anticipatory guidance and education for the patient, and proactive interventions for ports in anticipation of need for dialysis. A medical home for chronic renal failure would ensure primary care, specialty care including behavioral health, nursing, dialysis, nutritional education services and social supports would be coordinated to optimally manage declining renal function and support improved quality of life for these patients.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the attachment: **Domain 1 DSRIP Project Requirements Milestones and Metrics,** which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Create a comprehensive "one stop shopping" practice (or practices) to manage patients with chronic renal failure.
2. Identify a nephrologist champion to develop specialized medical home for patients with chronic renal failure.
3. Develop coordination partnerships with primary care physicians and practitioners in shared care of complex renal patients.
4. Co-locate services including behavioral health, social services and dialysis at clinic sites.
5. Adopt evidence based practice guidelines and protocols for patient management.
6. Ensure all PPS safety net providers are actively sharing EHR systems or other IT platforms 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~~secure notifications/messaging~~, by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
7. Ensure EHR systems or other IT platforms used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards by the end of ~~Demonstration Year~~Demonstration Year (DY) 3.
8. Use EHRs or other IT platforms to track all patients engaged in this project.
9. Coordinate with the Medicaid Managed Care organizations serving the affected population.

Partners Participating in this Project
Please list the name of the providers for this selected project along with identification numbers.

Provider Name	NPI

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1000 word limit, Total Possible Points – 20)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design and sites included. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population ~~you expect to engage~~ expected to be engaged through the implementation of this project. The definition of patient population be specific and could be based on geography, disease type, demographics, social need or other criteria. This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve overlapping service areas. If there are no other PPSs within the same service area, then no response is required.

2. **Scale of Implementation (Total Possible Points - 40):**
   DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess scale, please complete the following information:
   ~~DSRIP projects will be evaluated based upon the overall scale and broadness in scope, in terms of expected impact the project will have on the Medicaid program and patient population. Those projects larger in scale and impact will receive more funding than those smaller in scale/impact. In order to assess scale, please complete the following information below.~~

a. Please indicate the number of sites participating as a Specialized Medical Home for Chronic Renal Failure that the PPS intends to include in the project by the end of ~~Demonstration Year~~Demonstration Year (DY) 4, or sooner as applicable. This number should be entered in the table as *Total Committed*.

Project Scale	~~Number~~ Total Committed
Number of Specialized Medical Home for Chronic Renal Failure site(s)	

Please identify the number of committed providers who are a part of the local Safety Net.~~*Based on Department of Health Safety Net Provider designation~~

Project Scale	Number of Committed That Are Safety Net Providers*	Number of Safety Net Providers*	Percent of Safety Net Providers (10 Points)
Primary Care Physicians			
Non-PCP Practitioners			
Hospitals			
Clinics			
Health Home/Care Management			
Behavioral Health			
Substance Abuse			
Pharmacy			
All Other			

**Based on Department of Health Safety Net Provider designation*

b. Please indicate the total expected volume of patients the PPS intends to engage throughout this project by the end of Demonstration Year (DY) 4. This will become the *Expected # of Actively Engaged Patients*. Patient scale is measured by the total number of patients that are expected to be actively engaged by the end of Demonstration Year 4.~~Please~~

~~a. indicate the total expected volume of patients the PPS intends to target throughout this project by the end of Demonstration Year~~~~Demonstration Year (DY)~~ ~~4.~~

Patient Scale	Commitment
Targeted Population to Benefit from Project	
Total Attributed Population	
% of Total Attributed to Benefit from Project	

3. Speed of Implementation/Patient Engagement (Total Possible Points - 40):

DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and active engagement of patients will receive more funding than those taking longer to meet goals. Progress towards and achievement of PPS commitments to these scale measures as provided in the application will be included in achievement milestones for future PPS funding. In order to assess speed and patient engagement, please complete the following information:

a. Please indicate the Demonstration Year (DY) and Quarter by which all participating sites will achieve project requirements. **Project speed is measured by how fast all the project requirements for all chosen locations are met.**

PPSs will be expected to meet these requirements for all of the providers, sites, or other categories of entities included in the PPS "total committed" scale metric, unless otherwise specified in the Domain 1 DSRIP Project Requirements Milestones and Metrics.
~~**Speed of Implementation/Patient Engagement (Total Possible Points - 40):**~~
~~DSRIP projects will be evaluated based upon the proposed speed of implementation and timeline for patient engagement. The projects with accelerated achievement of project requirements and impact on the target population will receive more funding than those taking longer to meet goals. In order to assess speed and patient engagement, please complete the following information.~~

~~Please indicate the Demonstration YearDemonstration Year (DY) and Quarter by which all sites participating in the project will meet all project requirements.~~

Project Implementation Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4
All Project Requirements Achieved										

~~a.~~b. Please indicate the expected timeline for achieving 100% engagement of total expected number of actively engaged patients identified ~~in part a~~. For example, the PPS may indicate that 25% of patients will be actively engaged by the end of Demonstration Year (DY) 1, 50% by the end of DY2, and 100% by the end of DY 3.
~~Please indicate the expected timeline for engagement of patients within the project. For example, the PPS may indicate that 25% of targeted patients will be *actively engaged* by the end of Demonstration yearDemonstration Year (DY) 1, 50% by the end of Demonstration yearDemonstration Year (DY) 2, etc.~~

Patient Engagement Speed	DY0 (Baseline)		DY1		DY2		DY3		DY 4	
	Q1/Q2	Q3/Q4	~~Q1/~~Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4	Q1/Q2	Q3/Q4

Number of Actively Engaged Patients ~~Expected # of *Actively Engaged* Patients~~										
Expected # of Actively Engaged Patients~~Targeted Population~~										
% of Patients that are Actively Engaged ~~% of Patients that are *Actively Engaged*~~										

**For this project, Actively Engaged is defined as the number of participating patients actively receiving services at Specialized Medical Home(s) for Chronic Renal Failure. Please note: It is expected that the baseline number of patients engaged in this project may be 0. If so, please indicate 0 in the Year 0 baseline column.*

~~3.~~4. Project Resource Needs and Other Initiatives (1000 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?~~within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

~~4.~~5. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project, measured by particular metrics as presented in the attachment **Domain 1 DSRIP Project Requirements Milestones & Metrics**. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its target populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements, scale of project implementation, and patient engagement progress in the project.

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.

~~b.~~ **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in Domain 1 DSRIP Project Requirements Milestones & Metrics. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.a.i Promote mental, emotional, and behavioral (MEB) well-being in communities (Focus Area 1)

Project Objective: This project will help to promote mental, emotional, and behavioral (MEB) well-being in communities.

Project Description: The best opportunity to improve the public's mental health and prevent its development from manifesting is the delivery of preemptive interventions. This project focuses on increasing the use of evidence-informed policies and evidence-based programs pertaining to the healthy development of children, youth, and adults.

- Increasing evidence indicates that promotion of positive aspects of mental health is an important approach to reducing MEB disorders and related problems.
- The 2009 IOM report concluded that the promotion of mental health should be recognized as an important component of the mental health spectrum, rather than be merged with prevention.
- MEB health serves as a foundation for prevention and treatment of MEB disorders.
- A developmental, interdisciplinary approach to MEB health promotion will affect homes, schools, workplaces, and communities.
- Child and youth development research should be synthesized from a State MEB health well-being perspective, and assessed to identify opportunities for action.
- Research indicates that focusing on positive child and youth development policies has the potential for the greatest return on investment

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements.

1. Identify and implement evidence-based practices and environmental strategies that promote MEB health. A menu of interventions is found on the Prevention Agenda website accessible via the following:
    - Website:(http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/mhsa/interventions.htm)
    - Section: Promote Mental Health and Prevent Substance Abuse Action Plan, Interventions for Goal 1: To promote mental, emotional and behavioral (MEB) well-being in communities
2. Support and facilitate quality improvement of evidence-based practices and environmental strategies that promote MEB health.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design~~ and sites included~~. For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the ~~target~~ patient population ~~you expect~~ expected to be engaged ~~that will be impacted by~~through the implementation of this project. ~~Target~~ The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~

   c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

   f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. **Project Resource Needs and Other Initiatives (750 word limit, Not Scored)**

   a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~ by ~~April 1~~March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project. important milestones for project implementation and speed of project implementation.~~

a. Detailed Implementation Plan: By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the

project application. ~~Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. Quarterly Reports: PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.a.ii Prevent Substance Abuse and Other Mental Emotional Disorders (Focus Area 2)

Project Objective: This project will help to prevent substance abuse and other mental emotional disorders.

Project Description: Implement strategies to prevent underage drinking, non-medical use of prescription medications, excessive alcohol consumption by adults, and reduce tobacco use among adults who report poor mental health. Substance abuse, depression, and other MEB disorders hurt the health, public safety, welfare, education, and functioning of New York State residents. In addition to evidence that substance abuse and other MEB disorders can be prevented, there is confirmation that early identification and adequate societal support can prevent and alleviate serious consequences such as death, poor functioning, and chronic illness.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements. The PPS must show implementation of two of the three sector projects in their project plan. The implementation must address a specific need identified in the community assessment and address the full service area population. For each sector project, there is a list of potential interventions that the PPS can use to develop its project. These interventions are found on the Prevention Agenda website under "Interventions to Promote Mental Health and Prevent Substance Abuse" (http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/mhsa/interventions.htm).

1. Identify and implement evidence-based practices and environmental strategies to prevent underage drinking, substance abuse, and other MEB disorders.
2. Consider evidence based strategies to reduce underage drinking such as those promulgated by the U.S. Surgeon General and the Centers for Disease Control and Prevention.
3. Increase understanding of evidence-based practices for smoking cessation among individuals with mental illness and/or substance abuse disorder.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population must be specific and could be based on geography, disease type, demographics, social need or other criteria. ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~

~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~f.~~g. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~
~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application. ~~Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.a.iii Strengthen Mental Health and Substance Abuse Infrastructure across Systems (Focus Area 3)

Project Objective: This project will help to strengthen mental health and substance abuse infrastructure across systems.

Project Description: Support collaboration among leaders, professionals, and community members working in MEB health promotion to address substance abuse and other MEB disorders. MEB health promotion and disorders prevention is a relatively new field, requiring a paradigm shift in approach and perspective. This project will address chronic disease prevention, treatment and recovery, and strengthen infrastructure for MEB health promotion and MEB disorder prevention. Meaningful data and information at the local level, training on quality improvement, evaluation and evidence-based approaches, and cross-disciplinary collaborations need to be strengthened.

Project Requirements: The PPS must show implementation of three of the four sector projects in their project plan. The implementation must address a specific need identified in the community assessment and address the full service area population. For each sector project, specific potential interventions are identified on the Preventive Agenda website under "Interventions to Promote Mental Health and Prevent Substance Abuse" (http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/mhsa/interventions.htm).

1. Participate in MEB health promotion and MEB disorder prevention partnerships.
2. Expand efforts with DOH and OMH to implement 'Collaborative Care' in primary care settings throughout NYS.
3. Provide cultural and linguistic training on MEB health promotion, prevention and treatment.
4. Share data and information on MEB health promotion and MEB disorder prevention and treatment.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to~~

~~repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~

~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?

~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**
Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~
~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.b.i Promote tobacco use cessation, especially among low SES populations and those with poor mental health (Focus Area 2; Goal #2.2)

Project Objective: This project will promote tobacco use cessation, especially among low SES populations and those with poor mental health.

Project Description: Tobacco addiction is the leading preventable cause of morbidity and mortality in New York State (NYS). Cigarette use alone results in an estimated 25,000 deaths in NYS. There are estimated to be 570,000 New Yorkers afflicted with serious disease directly attributable to their smoking. The list of illnesses caused by tobacco use is long and contains many of the most common causes of death. These include many forms of cancer (including lung and oral); heart disease; stroke; chronic obstructive pulmonary disease and other lung diseases.

The economic costs of tobacco use in NYS are staggering. Smoking-attributable healthcare costs are $8.2 billion annually, including $3.3 billion in annual Medicaid expenditures. In addition, smoking-related illnesses result in $6 billion in lost productivity. Reducing tobacco use has the potential to save NYS taxpayers billions of dollars every year.

Although there have been substantial reductions in adult smoking in NYS, some tobacco use disparities have become more pronounced over the past decade. Smoking rates did not decline among low-socioeconomic status adults and adults with poor mental health. This project is targets decreasing the prevalence of cigarette smoking by adults 18 and older by increasing the use of tobacco cessation services, including NYS Smokers' Quitline and nicotine replacement products.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements. The implementation must address a specific need identified in the community assessment and address the full service area population.

1. Adopt tobacco-free outdoor policies.
2. Implement the US Public Health Services Guidelines for Treating Tobacco Use.
3. Use electronic medical records to prompt providers to complete 5 A's (Ask, Assess, Advise, Assist, and Arrange).
4. Facilitate referrals to the NYS Smokers' Quitline.
5. Increase Medicaid and other health plan coverage of tobacco dependence treatment counseling and medications.
6. Promote smoking cessation benefits among Medicaid providers.
7. Create universal, consistent health insurance benefits for prescription and over-the-counter cessation medications.
8. Promote cessation counseling among all smokers, including people with disabilities.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   ~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.b.ii Increase Access to High Quality Chronic Disease Preventative Care and Management in Both Clinical and Community Settings (Focus Area 3) (This project targets chronic diseases that are not included in Domain 3, such as cancer)

Project Objective: This project will help to increase access to high quality chronic disease preventative care and management in both clinical and community settings for chronic diseases that are not included in Domain 3 projects, such as cancer.

Project Description: The delivery of high-quality chronic disease preventive care and management can prevent much of the burden of chronic disease or avoid many related complications. Many of these services have been shown to be cost-effective or even cost-saving. However, many New Yorkers do not receive the recommended preventive care and management that include screening tests, counseling, immunizations or medications used to prevent disease, detect health problems early, and prevent disease progression and complications. This project is targeted on increasing the numbers of New Yorkers who receive evidence based preventative care and management for chronic diseases.

Project Requirements: The project must clearly demonstrate the following project requirements. In addition, please be sure to reference the document, **Domain 1 DSRIP Project Requirements Milestones and Metrics**, which will be used to evaluate whether the PPS has successfully achieved the project requirements. The implementation must address a specific need identified in the community assessment and address the full service area population.

1. Establish or enhance reimbursement and incentive models to increase delivery of high-quality chronic disease prevention and management services.
2. Offer recommended clinical preventive services and connect patients to community-based preventive service resources.
3. Incorporate Prevention Agenda goals and objectives into hospital Community Service Plans, and coordinate implementation with local health departments and other community partners.
4. Adopt and use certified electronic health records, especially those with clinical decision supports and registry functionality. Send reminders to patients for preventive and follow-up care, and identify community resources available to patients to support disease self-management.
5. Adopt medical home or team-based care models.
6. Create linkages with and connect patients to community preventive resources.
7. Provide feedback to clinicians around clinical benchmarks and incentivize quality improvement efforts.
8. Reduce or eliminate out-of-pocket costs for clinical and community preventive services.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   ~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

   ~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. **Project Resource Needs and Other Initiatives (750 word limit, Not Scored)**

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.c.i Decrease HIV morbidity (Focus Area 1; Goal #1)

Project Objective: This project is targeted at decreasing HIV morbidity.

Project Description: HIV/AIDS, sexually transmitted diseases (STDs) and hepatitis C (HCV) are significant public health concerns. New York State (NYS) remains at the epicenter of the HIV epidemic in the country, ranking first in the number of persons living with HIV/AIDS. By the end of 2010, approximately 129,000 New Yorkers were living with HIV or AIDS, with nearly 3,950 new diagnoses of HIV infection in 2010.[1] Furthermore, 123,122 New Yorkers had STDs, representing 70% of all communicable diseases reported statewide in 2010.[2] The number or people with chronic or resolved cases of HCV in NYS exceeded 175,000 between 2001 and 2009. However, many of those with chronic HCV do not know they are infected, and recently it has been noted that more New Yorkers are dying from HCV than from HIV.

This project is targeted at reducing the newly diagnosed HIV case rate in New York by 25% to no more than 14.7 new diagnoses per 100,000 by December 31, 2017.

Project Requirements: Each of the four HIV/STD Projects contain the same 13 sector projects. PPS implementing this project will need to review these projects and chose at least 7 or more that are impactful upon their population, state why the sector projects were chosen, and then develop their Domain 4 project using those sector projects. The PPS at any time may add additional sector projects if it is determined these will add to the impact of their project.

1. Decrease HIV and STD morbidity and disparities; increase early access to and retention in HIV care.
2. Increase peer-led interventions around HIV care navigation, testing, and other services.
3. Launch educational campaigns to improve health literacy and patient participation in healthcare, especially among high-need populations, including: Hispanics, lesbian, gay, bisexual, and transgender (LGBT) groups.
4. Design all HIV interventions to address at least two co-factors that drive the virus, such as homelessness, substance use, history of incarceration, and mental health.
5. Assure cultural competency training for providers, including gender identity and disability issues.
6. Implement quality indicators for all parameters of treatment for all health plans operating in New York State. An example would be raising the percentage of HIV-positive patients seen in HIV primary care settings who are screened for STDs per clinical guidelines.
7. Empower people living with HIV/AIDS to help themselves and others around issues related to prevention and care.
8. Educate patients to know their right to be offered HIV testing in hospital and primary care settings.
9. Promote interventions directed at high-risk individual patient, such as therapy for depression.
10. Promote group or behavioral change strategies in conjunction with HIV/STD efforts.
11. Assure that consent issues for minors are not a barrier to HPV vaccination.
12. Establish formal partnerships between schools and/or school clinics, and community-based organizations to deliver health education and support teacher training programs.

13. Promote delivery of HIV/STD Partner Services to at risk individuals and their partners.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.c.ii Increase early access to, and retention in, HIV care (Focus Area 1; Goal #2)

Project Objective: This project will increase early access to, and retention in, HIV care.

Project Description: This project is targeted at increasing the percentage of HIV-infected persons with a known diagnosis who are in care by 9% to 72% by December 31, 2017.

This project is also targeted at increasing the percentage of HIV-infected persons with known diagnoses who are virally suppressed to 45% by December 31, 2017.

Project Requirements: Each of the four HIV/STD Projects contain the same 13 sector projects. PPS implementing this project will need to review these projects and chose at least 7 or more that are impactful upon their population, state why the sector projects were chosen, and then develop their Domain 4 project using those sector projects. The PPS at any time may add additional sector projects if it is determined these will add to the impact of their project.

1. Decrease HIV and STD morbidity and disparities; increase early access to and retention in HIV care.
2. Increase peer-led interventions around HIV care navigation, testing, and other services.
3. Launch educational campaigns to improve health literacy and patient participation in healthcare, especially among high-need populations, including: Hispanics, lesbian, gay, bisexual, and transgender (LGBT) groups.
4. Design all HIV interventions to address at least two co-factors that drive the virus, such as homelessness, substance use, history of incarceration, and mental health.
5. Assure cultural competency training for providers, including gender identity and disability issues.
6. Implement quality indicators for all parameters of treatment for all health plans operating in New York State. An example would be raising the percentage of HIV-positive patients seen in HIV primary care settings who are screened for STDs per clinical guidelines.
7. Empower people living with HIV/AIDS to help themselves and others around issues related to prevention and care.
8. Educate patients to know their right to be offered HIV testing in hospital and primary care settings.
9. Promote interventions directed at high-risk individual patient, such as therapy for depression.
10. Promote group or behavioral change strategies in conjunction with HIV/STD efforts.
11. Assure that consent issues for minors are not a barrier to HPV vaccination.
12. Establish formal partnerships between schools and/or school clinics, and community-based organizations to deliver health education and support teacher training programs.
13. Promote delivery of HIV/STD Partner Services to at risk individuals and their partners.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design.~~ and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population expected to be engaged~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   ~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

   ~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. **Project Resource Needs and Other Initiatives (750 word limit, Not Scored)**

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.c.iii Decrease STD morbidity (Focus Area 1; Goal #3)

Project Objective: This project will help to decrease STD morbidity.

Project Description: The same behaviors and community characteristics associated with HIV also place individuals and communities at risk for STDs and viral hepatitis. STDs increase the likelihood of HIV transmission and acquisition. Epidemiological data increasingly points to HIV, STDs, and HCV as "syndemics", or infections which occur in similar groups of people with the same behavioral risk factors. Notably, in the United States in 2010, the leading cause of death among people with HIV was liver disease from co-infection with HCV.[3] This project is targeted at reducing the rates of Gonorrhea, Chlamydia, and primary, and secondary Syphilis by 10% in New York State. This project is also targeted at reducing the rates of congenital Syphilis by 10%.

Project Requirements: Each of the four HIV/STD Projects contain the same 13 sector projects. PPS implementing this project will need to review these projects and chose at least 7 or more that are impactful upon their population, state why the sector projects were chosen, and then develop their Domain 4 project using those sector projects. The PPS at any time may add additional sector projects if it is determined these will add to the impact of their project.

1. Decrease HIV and STD morbidity and disparities; increase early access to and retention in HIV care.
2. Increase peer-led interventions around HIV care navigation, testing, and other services.
3. Launch educational campaigns to improve health literacy and patient participation in healthcare, especially among high-need populations, including: Hispanics, lesbian, gay, bisexual, and transgender (LGBT) groups.
4. Design all HIV interventions to address at least two co-factors that drive the virus, such as homelessness, substance use, history of incarceration, and mental health.
5. Assure cultural competency training for providers, including gender identity and disability issues.
6. Implement quality indicators for all parameters of treatment for all health plans operating in New York State. An example would be raising the percentage of HIV-positive patients seen in HIV primary care settings who are screened for STDs per clinical guidelines.
7. Empower people living with HIV/AIDS to help themselves and others around issues related to prevention and care.
8. Educate patients to know their right to be offered HIV testing in hospital and primary care settings.
9. Promote interventions directed at high-risk individual patient, such as therapy for depression.
10. Promote group or behavioral change strategies in conjunction with HIV/STD efforts.
11. Assure that consent issues for minors are not a barrier to HPV vaccination.
12. Establish formal partnerships between schools and/or school clinics, and community-based organizations to deliver health education and support teacher training programs.
13. Promote delivery of HIV/STD Partner Services to at risk individuals and their partners.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population you expected to be engaged ~~expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   ~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.c.iv Decrease HIV and STD disparities (Focus Area 1; Goal #4)

Project Objective: This project will help to decrease HIV and STD disparities.

Project Description: The impact of HIV, STDs, and HCV is greater in some population groups. For instance, non-Whites have rates of infection that are several times higher than Whites. Prevention interventions, including those that affect underlying factors such as stigma and discrimination, are needed to address these historical inequities. People of color account for more than 75% of new HIV diagnoses and, for persons living with HIV, the racial/ethnic distribution is 21% White, 43% Black, 32% Hispanic, 1.2% Asian/Pacific Islander, 0.1% Native American, and 2.8% more than one racial group. Data on race and ethnicity of people with STDs and HCV suggest significant disparities exist as well. Men who have sex with men, transgender persons, and women of color continue to have much higher rates of these diseases than the general population. Though HIV among injection drug users has decreased steadily (due in large part to expanded access to sterile syringes), HCV among drug injectors is prevalent.

This project is targeted at decreasing the gap in rates of new HIV diagnoses by 25% between Whites and Blacks to 45.7 per 100,000 population, and between Whites and Hispanics to 22.3 per 100,000 by December 31, 2017. This project is also targeted at meeting the National HIV/AIDS Strategy benchmarks for viral suppression among non-white racial and ethnic groups and men who have sex with men (MSM) by December 31, 2017. (Data Source: NYS HIV Surveillance System)

Project Requirements: of the four HIV/STD Projects contain the same 13 sector projects. PPS implementing this project will need to review these projects and chose at least 7 or more that are impactful upon their population, state why the sector projects were chosen, and then develop their Domain 4 project using those sector projects. The PPS at any time may add additional sector projects if it is determined these will add to the impact of their project.

1. Decrease HIV and STD morbidity and disparities; increase early access to and retention in HIV care.
2. Increase peer-led interventions around HIV care navigation, testing, and other services.
3. Launch educational campaigns to improve health literacy and patient participation in healthcare, especially among high-need populations, including: Hispanics, lesbian, gay, bisexual, and transgender (LGBT) groups.
4. Design all HIV interventions to address at least two co-factors that drive the virus, such as homelessness, substance use, history of incarceration, and mental health.
5. Assure cultural competency training for providers, including gender identity and disability issues.
6. Implement quality indicators for all parameters of treatment for all health plans operating in New York State. An example would be raising the percentage of HIV-positive patients seen in HIV primary care settings who are screened for STDs per clinical guidelines.
7. Empower people living with HIV/AIDS to help themselves and others around issues related to prevention and care.
8. Educate patients to know their right to be offered HIV testing in hospital and primary care settings.

9. Promote interventions directed at high-risk individual patient, such as therapy for depression.
10. Promote group or behavioral change strategies in conjunction with HIV/STD efforts.
11. Assure that consent issues for minors are not a barrier to HPV vaccination.
12. Establish formal partnerships between schools and/or school clinics, and community-based organizations to deliver health education and support teacher training programs.
13. Promote delivery of HIV/STD Partner Services to at risk individuals and their partners.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. ~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)

a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include

issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that

exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. **Domain 1 DSRIP Project Requirements Milestones & Metrics:**
Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~
~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.

4.d.i Reduce premature births (Focus Area 1; Goal 1)

Project Objective: This project will help to reduce premature births.

Project Description: Preterm birth, defined as any birth before 37 weeks gestation, is the leading cause of infant death and long-term neurological disabilities in children. Babies born prematurely or at low birth weight are more likely to have or develop significant health problems, including disabling impairments, compared to children who are born at full term at a normal weight. Preterm infants are vulnerable to respiratory, gastrointestinal, immune system, central nervous system, hearing and vision problems, and often require special care in a neonatal intensive care unit after birth. Longer-term problems may include cerebral palsy, mental retardation, vision and hearing impairments, behavioral and social-emotional concerns, learning difficulties, and poor growth. More than 70% of premature babies are late preterm births, delivered between 34 and <37 weeks gestation. While these infants generally are healthier than babies born earlier, they are still three times more likely than full-term infants to die during their first year.

Prematurity can also pose significant emotional and economic burdens on families. In 2010, 11.6% of New York State births were preterm. Babies who are born preterm cost the US healthcare system more than $26 billion annually. In 2007, about 48% of preterm infant hospital stays nationally were paid by Medicaid, the largest source of health insurance for preterm infants. This project is targeted reducing the rate of preterm birth in NYS by at least 12% to 10.2% by December 31, 2017.

Project Requirements: The PPS must undertake actions that address all sector projects in their project plan. The implementation must address a specific need identified in the community assessment and address the full service area population.

1. Ask all pregnant women about tobacco use and provide augmented, pregnancy-tailored counseling for smokers.
2. Provide timely, continuous, and comprehensive prenatal care services to pregnant women in accordance with NYS Medicaid prenatal care standards and other professional guidelines.
3. Work with paraprofessionals, including peer counselors, lay health advisors, and community health workers to reinforce health education, healthcare service utilization, and enhance social support to high-risk pregnant women.
4. Implement innovative models of prenatal care, such as Centering Pregnancy, demonstrated to improve preterm birth rates, and other adverse pregnancy outcomes.
5. Provide clinical management of preterm labor in accordance with current clinical guidelines.
6. Implement practices to expedite enrollment of low-income women in Medicaid, including presumptive eligibility for prenatal care and family planning coverage.
7. Utilize health information technology to facilitate more robust intake/enrollment, screening/risk assessment, referral, follow-up, and care coordination practices across health and human service providers including Health Homes, where applicable.
8. Refer high-risk pregnant women to home visiting services in the community.

Partnering with Entities Outside of the PPS for this Project
Please provide the name of any partners included for this project outside of the PPS providers. This may include an entity or organization with a proven track record in addressing the goals of this project.

Entity Name

Project Response & Evaluation (Total Possible Points – 100):

1. **~~Project Description and Justification~~Project Justification, Assets, Challenges, and Needed Resources (1500 word limit, Total Possible Points – 100)**

   a. Utilizing data obtained from the Community Needs Assessment (CNA), please address the identified gaps this project will fill in order to meet the needs of the community. ~~For example, please identify the approach to develop new or expand current resources, or alternatively, to repurpose existing resources to meet the needs of the community.~~ Please link the findings from the Community Needs Assessment with the project design. ~~and sites included.~~ For example, identify how the project will develop new resources or programs to fulfill the needs of the community.

   b. Please define the patient population expected to be engaged ~~you expect to engage~~ through the implementation of this project. The definition of patient population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.* ~~This patient population that the PPS expects to actively engage over the course of the project will be a subset of the total attributed population.~~
   ~~Please define the target patient population that will be impacted by this project. Target population *must be specific and could be based on geography, disease type, demographics, social need or other criteria.*~~

   ~~b.~~c. Please provide a succinct summary of the current assets and resources that can be mobilized and employed to help achieve this DSRIP Project. In addition, identify any needed community resources to be developed or repurposed.

   ~~c.~~d. Describe anticipated project challenges or anticipated issues the PPS will encounter while implementing this project and describe how these challenges will be addressed. Examples include issues with patient barriers to care, provider availability, coordination challenges, language and cultural challenges, etc. Please include plans to individually address each challenge identified.

   ~~d.~~e. Please outline how the PPS plans to coordinate on the DSRIP project with other PPSs that serve an overlapping service area. If there are no other PPS within the same service area, then no response is required.

~~e.~~f. Please identify and describe the important project milestones relative to the implementation of this project. In describing each of the project milestones relative to implementation, please also provide the anticipated timeline for achieving the milestone.

2. Project Resource Needs and Other Initiatives (750 word limit, Not Scored)

a. Will this project require Capital Budget funding? ***(Please mark the appropriate box below)***

Yes	No

If yes: Please describe why capital funding is necessary for the Project to be successful.

b. Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative or are expected to be involved in during the life of the DSRIP program related to this project's objective?
~~Are any of the providers within the PPS and included in the Project Plan PPS currently involved in any Medicaid or other relevant delivery system reform initiative related to this project's objective?~~

Yes	No

If yes: ~~Please identify the initiatives in which the provider is participating in the table~~Please identify the current or expected initiatives in which the provider is (or may be) participating within the table below, which are funded by the U.S. Department of Health and Human Services, as well as other relevant delivery system reform initiative(s) currently in place.

Name of Entity	Medicaid/Other Initiative	Project Dates	Description of Initiatives

~~b.~~c. Please describe how this proposed DSRIP project either differs from, or significantly expands upon, the current Medicaid initiative(s) identified above. A PPS may pursue a DSRIP project that exists as part of another effort if the PPS can demonstrate a significant enhancement to the existing project.

3. Domain 1 DSRIP Project Requirements Milestones & Metrics:

Progress towards achieving the project goals and project requirements specified above will be assessed by specific milestones for each project. Domain 1 Project Milestones & Metrics are based largely on investments in technology, provider capacity and training, and human resources that will strengthen the ability of the PPS to serve its populations and successfully meet DSRIP project goals.

PPS project reporting will be conducted in two phases: A detailed Implementation Plan due ~~in~~by March 1, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards completion of project requirements.~~, scale of project implementation, and patient engagement progress in the project.~~

~~PPS project reporting will be conducted in two phases: A detailed Implementation Plan due in April 1~~March 1~~, 2015 and ongoing Quarterly Reports throughout the entire DSRIP period. Both the initial Implementation Plan and Quarterly Reports shall demonstrate achievement towards important milestones for project implementation and speed of project implementation.~~

a. **Detailed Implementation Plan:** By ~~April 1~~March 1, 2015, PPS will submit a detailed Implementation Plan to the State for approval. The format and content of the Implementation Plan will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.~~ Speed and scale submissions with the project application will directly impact Domain 1 payment milestones.~~

b. **Quarterly Reports:** PPS will submit quarterly reports on progress towards achievement of project requirements as defined in the application. Quarterly reports to the Independent Assessor will include project status and challenges as well as implementation progress. The format and content of the quarterly reports will be developed by the Independent Assessor and the Department of Health for the purpose of driving project payment upon completion of project milestones as indicated in the project application.