

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

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

# Print Summary Print All

	PPS Information
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015
PPS	Nassau Queens Performing Provider System, LLC
PPS Number	14

	Achievo	ement Value (	AV) Scorecard	Summary				
		AV I	Data			Payme	nt Data	
Project Link (click on the purple link below to access each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned
Domain I - Organizational (All Projects)	4.00	4.00	0.00	4.00	Organizat	•	e embedded w payment	ithin each
2.a.i	19.00	19.00	0.00	19.00	\$1,979,504.37	\$1,979,504.37	\$ -	\$1,979,504.37
2.b.ii	20.00	19.00	0.00	19.00	\$1,413,931.70	\$1,272,538.53	\$ -	\$1,272,538.53
2.b.iv	20.00	19.00	0.00	19.00	\$1,519,976.57	\$1,367,978.92	\$ -	\$1,367,978.92
2.b.vii	20.00	19.00	0.00	19.00	\$1,449,279.99	\$1,304,351.99	\$ -	\$1,304,351.99
2.d.i	9.00	8.00	0.00	8.00	\$1,516,874.07	\$1,365,186.66	\$ -	\$1,365,186.66
3.a.i	15.00	14.00	0.00	14.00	\$1,366,333.29	\$1,229,699.96	\$ -	\$1,229,699.96
3.a.ii	15.00	14.00	0.00	14.00	\$1,307,886.82	\$1,177,098.14	\$ -	\$1,177,098.14
3.b.i	12.00	11.00	0.00	11.00	\$1,031,288.64	\$928,159.78	\$ -	\$928,159.78
3.c.i	11.00	10.00	0.00	10.00	\$1,060,448.77	\$954,403.89	\$ -	\$954,403.89
4.a.iii	15.00	15.00	0.00	15.00	\$706,965.85	\$706,965.85	\$ -	\$706,965.85
4.b.i	13.00	13.00	0.00	13.00	\$813,010.72	\$813,010.72	\$ -	\$813,010.72



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Print Summary	
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AV Adjustments (Column F)								
Total	169.00	161.00	0.00	625.00	\$14,165,501	\$13,098,899	\$ -	\$13,098,899



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

Do	main I Organizati	onal Scoresheet				
Domain I Organizational	Review Status	AVs Available	AVs Awarded	Adjustments	Net AVs	AV
Workforce Strategy	Complete	N/A	N/A	0.00	N/A	N/A
Section 01 - Budget	Complete	1.00	1.00	0.00	1.00	100%
Section 02 - Governance	Complete	1.00	1.00	0.00	1.00	100%
Section 03 - Financial Sustainability	Complete	1.00	1.00	0.00	1.00	100%
Section 04 - Cultural Competency & Health Literacy	Complete	1.00	1.00	0.00	1.00	100%
Section 05 - IT Systems and Processes	Complete	N/A	N/A	N/A	N/A	N/A
Section 06 - Performance Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Section 07 - Practitioner Engagement	Complete	N/A	N/A	N/A	N/A	N/A
Section 08 - Population Health Management	Complete	N/A	N/A	N/A	N/A	N/A
Section 09 - Clinical Integration	Complete	N/A	N/A	N/A	N/A	N/A
Section 10 - General Project Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Total	Complete	4.00	4.00	0.00	4.00	100%

Net Organizational AVs Awarded: 4 out of 4

#### **Hide Reviewer Comments**

			Workforce S	Strategy			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
			ı				
		Define target workforce state (in line with DSRIP program's goals)	N/A Page	N/A	In Process	Pass & Ongoing	



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							]
		Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce Strategy		Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	Not Started	Pass & Ongoing	
dget							
Jpdates non AV- driving)		4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	N/A	N/A	Not Started	Pass & Ongoing	
-							
		5. Develop training strategy	N/A	N/A	Not Started	Pass & Ongoing	-
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
				•			]
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional Vorkforce							
Strategy Opic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
			Page	4			



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

			Section 01 -	Budget			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	In Process	Pass & Ongoing	
		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly Project							
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	In Process	Pass & Ongoing	1
Budget and Flow of							
Funds		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	
			Page	5			



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

Total 1

			Section 02 - G	overnance			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Finalize governance structure and sub- committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Structure		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Updates							1
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Update							
		5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	3/31/2016	In Process	Pass & Ongoing	
		6. Finalize partnership agreements or contracts with CBOs	N/A	3/31/2016	In Process	Pass & Ongoing	
Additional							
Governance Milestones (non AV-		7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A Page	3/31/2016	In Process	Pass & Ongoing	N/A



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arivirig)							
		8. Finalize workforce communication and engagement plan	N/A	6/30/2016	In Process	Pass & Ongoing	
		9. Inclusion of CBOs in PPS Implementation	N/A	3/31/2017	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Governance Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1



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		Sec	tion 03 - Financi	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awa
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Financial Stability Update		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	In Process	Pass & Ongoing	1
PPS Transition		4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
to Value							
Based Payment System		5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	Not Started	Pass & Ongoing	
		6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	TBD	N/A	N/A	N/A	
Additional							



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PPS Transition to Value Based		7. Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	TBD	N/A	N/A	N/A	N/A
Payment							
System		8. ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs	TBD	N/A	N/A	N/A	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial							_
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1



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		Section 04	- Cultural Compe	tency & Health L	iteracy		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Cultural							
Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	6/30/2016	In Process	Pass & Ongoing	1
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Cultural Competency							N1/A
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Topic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

Total 1

		Sect	tion 05 - IT Syster	ns and Processes	S		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	N/A	3/31/2016	In Process	Pass & Ongoing	
IT Systems		Develop an IT Change Management					
		Strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	
and Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	3/31/2017	Not Started	Pass & Ongoing	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	12/31/2016	Not Started	Pass & Ongoing	
		5. Develop a data security and confidentiality plan.	N/A	9/30/2016	Not Started	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	



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	_	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
Additional						
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Processes Topic Areas						
Topic Areas	_	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
			Total			

		Sec	tion 06 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performanc -		Establish reporting structure for PPS-wide performance reporting and communication.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
			Page 1	12			



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		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc							
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
							N1/A
e Reporting Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	tion 07 - Practitio	ner Engagement	t		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	N/A	6/30/2016	In Process	Pass & Ongoing	
Practitioner Engagement		2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
			Page :	13			



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	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner						N/A
Engagement Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

	Section 08 - Population Health Management									
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded			
Measure	Driving	Willestoffe	Date	Date	Status		Av Awarueu			
		Develop population health management roadmap.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A			
Population							IN/A			
Health		2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	Not Started	Pass & Ongoing	N/A			



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							IN/A				
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing					
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing					
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A				
Additional Population											
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing					
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing					
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing					
			Total				0				

	Section 09 - Clinical Integration									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		Perform a clinical integration 'needs assessment'.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A			
Clinical							N/A			



		Total				0
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			-			
Integration Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Additional Clinical						N/A
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
			-			
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
						N/A
Integration	2. Develop a Clinical Integration strategy.	N/A	9/30/2016	Not Started	Pass & Ongoing	N/A
Integration						



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Project 2.a.i

	Project Snapshot				
Project Domain   System Transformation Projects (Domain 2)					
Project ID	2.a.i				
	Create an Integrated Delivery System focused on				
Project Title	Evidence Based Medicine and Population Health				
	Management				

Payment Snapshot				
Payment Available (DY1)	\$	9,897,521.87		
DY1 Payment Earned to Date	\$	5,938,513.12		
DY1 Payment Not Earned to Date	\$	-		
DY1 Funding Remaining	\$	3,959,008.75		
Funding Available for Distribution DY1Q2	\$	1,979,504.37		

	2.a.i Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	989,752	989,752				
	Patient Engagement Speed	N/A	0.00	0.00	0%								
	Domain 1 Subtotal		4.00	4.00	100%	80%	10%	989,752	989,752				
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	989,752	989,752				
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-				
	Domain 2 Subtotal			15.00	100%	20%	10%	989,752	989,752				
	Total	Complete	19.00	19.00	100%	100%	20%	1,979,504	1,979,504				

Total Project 2.a.i AVs Awarded: 19 out of 19

#### Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
			'			,
Total						0.00
	Page 1	7				



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Domain 1 Project Prescribed	Milestones -	Project 2.a.i			
Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
<ol> <li>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.</li> </ol>	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Project Requirement and Metric/Deliverable  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 PPS' 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.  5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	Project Requirement and Metric/Deliverable  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 PPS' 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.  5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and	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 PPS' 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.  5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and	Project Requirement and Metric/Deliverable  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 PPS' 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.  5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and	Project Requirement and Metric/Deliverable  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 PPS' 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 directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.  5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration health management by actively using EHRs and  6. Perform population health management by actively using EHRs and



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	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Establish monthly meetings with Medicaid MCOs to discuss	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	utilization trends, performance issues, and payment reform.					
	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	11. Engage patients in the integrated delivery system through outreach	2/24/2010	2/24/2010	Not Charted	Dogs & Ongoing	N1/A
	and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
Total						0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R in DY1)					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333			
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333			



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Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ± Page 20	Pass & Ongoing	1



Print Nassau Queens Perform	ing Provider System, LLC -	Project 2.a.i
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
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New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

	Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Project 2.a.i		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5	
Total		15.00	



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Project 2.b.ii

	Project Snapshot				
Project Domain   System Transformation Projects (Domain 2)					
Project ID	2.b.ii				
Project Title	Development of Co-Located Primary Care Services in the Emergency Department				

Payment Snapshot				
Payment Available (DY1)	\$	7,069,658.48		
DY1 Payment Earned to Date	\$	4,241,795.09		
DY1 Payment Not Earned to Date	\$	-		
DY1 Funding Remaining	\$	2,827,863.39		
Funding Available for Distribution DY1Q2	\$	1,413,931.70		

			2.b.ii Score	sheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%	80% 10%	706,966	565,573
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	706,966	565,573
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	706,966	706,966
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal			15.00	100%	20%	10%	706,966	706,966
	Total Complete		20.00	19.00	95%	100%	20%	1,413,932	1,272,539

Total Project 2.b.ii AVs Awarded: 19 out of 20

#### Hide Reviewer Comments

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



Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed I	Milestones - F	Project 2.b.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Ensure appropriate location of the co-located primary care services in the ED to be located on the same campus of the hospital. All relocated PCMH practices will meet NCQA 2014 Level 3 PCMH standards and/or APCM within 2 years after relocation.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Ensure that new participating PCPs will meet NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. At start up, the participating PCPs must have open access scheduling extended hours, and have EHR capability that is interoperable with the ED.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Develop care management protocols for medical screening and PCP referral in compliance with EMTALA standards.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
_	4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote selfmanagement and knowledge on appropriate care.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	Раде 2					



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	6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.)	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	8. Utilize culturally competent community based organizations to raise community awareness of alternatives to the emergency room.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	9. Implement open access scheduling in all primary care practices.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Total						

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.ii (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333					
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333					



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CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1



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Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS		
reimbursement	Pass & Ongoing	1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Drivery Cover Leverth of Deletionship CO	Daniel Grande	0.5
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5



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

	Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 1				
Print Nassau Queens Performi	Nassau Queens Performing Provider System, LLC - Project 2.b.ii				
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5			
Total					



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

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

Project Snapshot						
<b>Project Domain</b>	System Transformation Projects (Domain 2)					
Project ID	2.b.iv					
Project Title	Care transitions intervention patients with a care transition plan developed prior to discharge.					

Payment Snapshot						
Payment Available (DY1)	\$	7,599,882.86				
DY1 Payment Earned to Date	\$	4,559,929.72				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	3,039,953.15				
Funding Available for Distribution DY1Q2	\$	1,519,976.57				

	2.b.iv Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%	10%	759,988	607,991	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%					
	Patient Engagement Speed	Complete	1.00	0.00	0%					
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	759,988	607,991	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	759,988	759,988	
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 2 Subtotal			15.00	100%	20%	10%	759,988	759,988	
Total Complete		20.00	19.00	95%	100%	20%	1,519,977	1,367,979		

Total Project 2.b.iv AVs Awarded: 19 out of 20

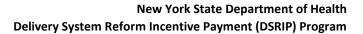
#### **Hide Reviewer Comments**

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



Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed I	Milestones - F	roject 2.b.iv			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	<ol> <li>Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.</li> </ol>	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	Engage with the Medicaid Managed Care Organizations and Health     Homes to develop transition of care protocols that will ensure	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	appropriate post-discharge protocols are followed.					
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	Protocols will include care record transitions with timely updates					
	provided to the members' providers, particularly primary care provider.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Ensure that a 30-day transition of care period is established.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	Page 9	20				





Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

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

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	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Total						0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iv (all Milestones are P4F	R in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Page 31		



	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
	Halaful Courteque and Demostful Office Staff (O24 and 25)	Dans & Ouncinn	0.5
	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
_			
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1



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Total		15.00
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
reimbursement	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS		



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 2.b.vii

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

Payment Snapshot							
Payment Available (DY1)	\$	7,246,399.94					
DY1 Payment Earned to Date	\$	4,347,839.96					
DY1 Payment Not Earned to Date	\$	-					
DY1 Funding Remaining	\$	2,898,559.98					
Funding Available for Distribution DY1Q2	\$	1,449,279.99					

	2.b.vii Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	724,640	579,712				
	Patient Engagement Speed	Complete	1.00	0.00	0%								
	Domain 1 Subtotal			4.00	80%	80%	10%	724,640	579,712				
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	724,640	724,640				
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-				
Domain 2 Subtotal			15.00	15.00	100%	20%	10%	724,640	724,640				
Total Complete			20.00	19.00	95%	100%	20%	1,449,280	1,304,352				

Total Project 2.b.vii AVs Awarded: 19 out of 20

#### **Hide Reviewer Comments**

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



Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed N	/lilestones - P	roject 2.b.vii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
•	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	Educate all staff on care pathways and INTERACT principles.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	4. Educate all stall officare pathways and inviender principles.	3/31/2018	3/31/2018	Not Started	r ass & Ongoing	IV/A
	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Create coaching program to facilitate and support implementation.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A



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	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Total						0.00

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.vii (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333			
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333			
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333			
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1			
	Page 36					



7	Time		
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1



Print Nassau Queens Performin	g Provider System, LLC - P	roject 2.b.vii
PDI 90— Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
TotalPage 38		15.00



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 2.d.i

	Project Snapshot					
<b>Project Domain</b>	System Transformation Projects (Domain 2)					
Project ID	2.d.i					
	Implementation of Patient Activation Activities to					
Drainst Title	Engage, Educate and Integrate the uninsured and					
Project Title	low/non-utilizing Medicaid populations into					
	Community Based Care					

Payment Snapshot	
Payment Available (DY1)	\$ 7,584,370.34
DY1 Payment Earned to Date	\$ 4,550,622.20
DY1 Payment Not Earned to Date	\$ -
DY1 Funding Remaining	\$ 3,033,748.13
Funding Available for Distribution DY1Q2	\$ 1,516,874.07

2.d.i Scoresheet																			
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)										
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%													
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	758,437	606,750										
	Patient Engagement Speed	Complete	1.00	0.00	0%														
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	758,437	606,750										
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	758,437	758,437										
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-										
	Domain 2 Subtotal			4.00	100%	20%	10%	758,437	758,437										
	Total Complete			8.00	89%	100%	20%	1,516,874	1,365,187										

Total Project 2.d.i AVs Awarded: 8 out of 9

	Domain 1 Project Milestones - Project 2.d.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A		
	Page 3	39						



	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total				0.00		

	Domain 1 Project Prescribed	Milestones -	Project 2.d.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	<ol> <li>Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.</li> </ol>	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
	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	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A



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7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N,
Include beneficiaries in development team to promote preventive	2/24/2040	2/24/2017	Nat Charles	Pass & Ongoing	
care.	3/31/2018	3/31/2017	Not Started	Pass & Oligoling	N,
9. Measure PAM® components	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N
10. Increase the volume of non-emergent (primary, behavioral, dental)					
care provided to UI, NU, and LU persons.	6/30/2018	3/31/2018	In Process	Pass & Ongoing	N,
11. Contract or partner with CBOs to develop a group of community					
navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N,
 12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N,
13. Train community navigators in patient activation and education,		I			
including how to appropriately assist project beneficiaries using the PAM®.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N



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14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
15. Inform and educate navigators about insurance options and	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
healthcare resources available to UI, NU, and LU populations.	0,02,2020	3,32,2323			,
16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

AV Driving Measure Reviewer S	
	tatus AVs Awarded
C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information  Pass & On	going 0.25
C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)  Pass & On	going 0.25
C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients  Pass & On	going 0.25



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

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C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25
ED use by uninsured	Pass & Ongoing	1
PAM Level	Pass & Ongoing	1
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1
Total		4.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.a.i

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

Payment Snapshot				
Payment Available (DY1) \$ 6,831,666.4				
DY1 Payment Earned to Date	\$	4,098,999.88		
DY1 Payment Not Earned to Date	\$	-		
DY1 Funding Remaining	\$	2,732,666.59		
Funding Available for Distribution DY1Q2	\$	1,366,333.29		

	3.a.i Scoresheet										
Domain	Domain Component		AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	683,167	546,533		
	Patient Engagement Speed	Complete	1.00	0.00	0%						
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	683,167	546,533		
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	683,167	683,167		
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 3 Subtotal			10.00	100%	20%	10%	683,167	683,167		
Total Complete			15.00	14.00	93%	100%	20%	1,366,333	1,229,700		

Total Project 3.a.i AVs Awarded: 14 out of 15

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



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	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Total					0

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3						
		✓ 3.a.i Model 1 ✓ 3.a	i Model 2	✓ 3.a.i Model 3	3		
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
		Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 1							
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	6/30/2018	In Process	Pass & Ongoing	N/A
		Page /	15				



	Print			ivussuu Qu	eens Perjorm	ing Provider System, LLC -	Project 3.u.i
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
		Page 4	16				



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Print			Nassau Que	eens Perform	ing Provider System, LLC -	Project 3.a.i
	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2020	On Hold	Pass & Ongoing	N/A
	Total					0

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.i (all Milestones are P4R in DY1)					
AV Driving	Meas ure	Reviewer Status	AVs Awarded			
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1			
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5			
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5			
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1			
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1			
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1			
	Page 47					



Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Project 3.a.ii

	Project Snapshot				
Project Domain   Clinical Improvement Projects (Domain 3)					
Project ID	3.a.ii				
Project Title	Behavioral health community crisis stabilization services				

Payment Snapshot					
Payment Available (DY1)	\$	6,539,434.09			
DY1 Payment Earned to Date	\$	3,923,660.46			
DY1 Payment Not Earned to Date	\$	-			
DY1 Funding Remaining	\$	2,615,773.64			
Funding Available for Distribution DY1Q2	\$	1,307,886.82			

	3.a.ii Scoresheet																	
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)									
	Domain 1 Organizational	Complete	4.00	4.00	100%	80% 10%												
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	653,943	523,155									
	Patient Engagement Speed	Complete	1.00	0.00	0%													
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	653,943	523,155									
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	653,943	653,943									
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-									
	Domain 2 Subtotal			10.00	100%	20%	10%	653,943	653,943									
	Total	Complete	15.00	14.00	93%	100%	20%	1,307,887	1,177,098									

Total Project 3.a.ii AVs Awarded: 14 out of 15

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



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Nassau Queens Performing Provider System, LLC - Project 3.a.ii

Print

Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed I	Milestones - I	Project 3.a.ii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA		
	2. Establish clear linkages with Health Homes, ER and hospital services							
	to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A		
	emergency room and inputent services.							
	3. Establish agreements with the Medicaid Managed Care organizations							
	serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	NA		
	4. Develop written treatment protocols with consensus from	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA		
	participating providers and facilities.	3,53,535	3,53,555					
	5. Include at least one hospital with specialty psychiatric services and	_ ,_ , ,_ ,_ ,_ ,	_ , , , , , , , , , , , , , , , , , , ,					
	crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA		
	psychiatric and crisis offenced 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).	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	NA		
	Page 50							



Print

Total						
1 - 32-2-2						
11. Use EHRs or other technical platforms to track all pat in this project.	ients engaged 3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA	
10. Ensure quality committee is established for oversight surveillance of compliance with protocols and quality of compliance.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	NA	
psychiatrists, mental health, behavioral health, and subst providers.	·	3/31/2018	In Process	Pass & Ongoing	NA	
Sestablish central triage service with agreements among	participating					
8. Ensure that all PPS safety net providers have actively consistent with local health information exchange/RHIO/SH share health information among clinical partners, including exchange (secure messaging), alerts and patient record local conditions are consistent of Demonstration Year (DY) 3.	IN-NY and ang direct 3/31/2018	3/31/2018	Not Started	Pass & Ongoing	NA	
7. Deploy mobile crisis team(s) to provide crisis stabilizat using evidence-based protocols developed by medical sta	1 3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA	

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.ii (all Milestones are P4R in DY1)						
AV Driving	Measure Reviewer Status						
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1				
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5				
	Page 51						



Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5



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

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Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.b.i

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

Payment Snapshot					
Payment Available (DY1)	\$	5,156,443.20			
DY1 Payment Earned to Date	\$	3,093,865.92			
DY1 Payment Not Earned to Date	\$	-			
DY1 Funding Remaining	\$	2,062,577.28			
Funding Available for Distribution DY1Q2	\$	1,031,288.64			

	3.b.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	4.00	4.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	515,644	412,515
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	515,644	412,515
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	20%	10%	515,644	515,644
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal			7.00	100%	20%	10%	515,644	515,644
	Total	Complete	12.00	11.00	92%	100%	20%	1,031,289	928,160

Total Project 3.b.i AVs Awarded: 11 out of 12

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



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.b.i

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Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed	Milestones -	Project 3.b.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	Page 5	55				



Print					
7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Provide opportunities for follow-up blood pressure checks without a					
copayment or advanced appointment.	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
 10. Identify patients who have repeated elevated blood pressure					
readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
11. 'Prescribe once-daily regimens or fixed-dose combination pills when				_	l .
appropriate.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
 42. Fallow we with a family to a second its based as a second in					
13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
14. Develop and implement protocols for home blood pressure	2/24/2049	2/24/2047	Nat Chart - 1	Doce 9 Ongoin-	NI/A
monitoring with follow up support.	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	63/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A



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16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
18. Adopt strategies from the Million Hearts Campaign.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this	3/31/2018	3/31/2018	Not Started	Pass & Ongoing	N/A
20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.b.i (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Aspirin Use	Pass & Ongoing	0.5					
	Discussion of Risks and Benefits of Aspirin Use	Pass & Ongoing	0.5					
	Controlling High Blood Pressure Page 57	Pass & Ongoing	1					



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Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Prevention Quality Indicator # 13 (Angina without procedure) ±	Pass & Ongoing	1
Prevention Quality Indicator # 7 (HTN) ±	Pass & Ongoing	1
Total		7.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.c.i

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

Payment Snapshot								
Payment Available (DY1)	\$	5,302,243.86						
DY1 Payment Earned to Date		3181346.315						
DY1 Payment Not Earned to Date	\$	-						
DY1 Funding Remaining	\$	2,120,897.54						
Funding Available for Distribution DY1Q2	\$	1,060,448.77						

	3.c.i Scoresheet														
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)						
	Domain 1 Organizational	Complete	4.00	4.00	100%	80%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	530,224	424,180						
	Patient Engagement Speed	#REF!	1.00	0.00	0%										
	Domain 1 Subtotal		5.00	4.00	80%	80%	10%	530,224	424,180						
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	20%	10%	530,224	530,224						
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-						
	Domain 2 Subtotal		6.00	6.00	100%	20%	10%	530,224	530,224						
	Total	#REF!	11.00	10.00	91%	100%	20%	1,060,449	954,404						

Total Project 3.c.i AVs Awarded: 10 out of 11

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



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.c.i

Print

Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
Total					0.00

	Domain 1 Project Prescribed Milestones -	Project 3.c.i				
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	In Process	Pass & Ongoing	N/A	
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2018	In Process	Pass & Ongoing	N/A	
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to	3/31/2018	In Process	Pass & Ongoing	N/A	
	improve health literacy, patient self-efficacy, and patient self-management.	3/31/2016	III FIOCESS	rass & Oligoling	IN/A	
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2018	Not Started	Pass & Ongoing	N/A	
	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Not Started	Pass & Ongoing	N/A	
	6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	In Process	Pass & Ongoing	N/A	
	7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net provides 60	3/31/2018	In Process	Pass & Ongoing	N/A	



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 3.c.i

Print

Total 0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.c.i (all Milestones are P4R	in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
	Prevention Quality Indicator # 1 (DM Short term complication) ± Page 61	Pass & Ongoing	1



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

Save & Return  Print	Achievement Value (AV) Scorecard DY1 Nassau Queens Perform	, Q2 July 1, 2015 - September 30, 2015 ing Provider System, LLC - Project 3.c.i
	Total	6.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 4.a.iii

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

Payment Snapshot						
Payment Available (DY1)	\$	3,534,829.24				
DY1 Payment Earned to Date	\$	2,120,897.54				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	1,413,931.70				
Funding Available for Distribution DY1Q2	\$	706,965.85				

	4.a.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	4.00	4.00	100%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	353,483	353,483	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		4.00	4.00	100%	80%	10%	353,483	353,483	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	353,483	353,483	
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			11.00	100%	20%	10%	353,483	353,483	
	Total Complete			15.00	100%	100%	20%	706,966	706,966	

Total Project 4.a.iii AVs Awarded: 15 out of 15

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4F	l in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1
	Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1



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Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
TotalPage 64		11.00



Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015

Nassau Queens Performing Provider System, LLC - Project 4.b.i

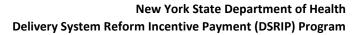
Project Snapshot						
<b>Project Domain</b>	Domain 4: Population-wide Projects: New York's					
Project ID	4.b.i					
	Promote Tobacco Use Cessation, especially among					
<b>Project Title</b>	low SES populations and those with poor mental					
	health					

Payment Snapshot						
Payment Available (DY1)	\$	4,065,053.62				
DY1 Payment Earned to Date	\$	2,439,032.17				
DY1 Payment Not Earned to Date	\$	-				
DY1 Funding Remaining	\$	1,626,021.45				
Funding Available for Distribution DY1Q2	\$	813,010.72				

	4.b.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	4.00	4.00	100%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	406,505	406,505	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		4.00	4.00	100%	80%	10%	406,505	406,505	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	20%	10%	406,505	406,505	
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			9.00	100%	20%	10%	406,505	406,505	
	Total Complete			13.00	100%	100%	20%	813,011	813,011	

Total Project 4.b.i AVs Awarded: 13 out of 13

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1						
	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1						





Total			9.00
	White non-Hispanics		
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
•			
	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
	Percentage of cigarette smoking among adults	Pass & Ongoing	1