General Instructions		
Step	**Description/Link**	**Image**
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	
2. Review AV Scorecard Overview	The AV scorecard Overview is a summary of the report	Click to Access AV Scorecard Overview

Functionality		
Step	**Description/Link**	**Image**
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	

Print Summary

Print All

PPS Information	
Quarter	DY1, Q3 October 1, 2015 - December 31, 2015
PPS	The New York Presbyterian Hospital of Queens
PPS Number	40

Achievement Value (AV) Scorecard Summary								
Project Link (click on the purple link below to access each individual project report)	**AV Data**				**Payment Data**			
	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	*Organizational funds are embedded within each project's payment*			
2.a.ii	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
2.b.v	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
2.b.vii	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
2.b.viii	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
3.a.i	16.00	16.00	0.00	16.00	$ -	$ -	$ -	$ -
3.b.i	13.00	13.00	0.00	13.00	$ -	$ -	$ -	$ -
3.d.ii	10.00	10.00	0.00	10.00	$ -	$ -	$ -	$ -
3.g.ii	11.00	11.00	0.00	11.00	$ -	$ -	$ -	$ -
4.c.ii	16.00	16.00	0.00	16.00	$ -	$ -	$ -	$ -

Print Summary

Print All

AV Adjustments (Column F)

Total	150.00	150.00	0.00	150.00	$ -	$ -	$ -	$ -

Save & Return

Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

Domain I Organizational Scoresheet						
Domain I Organizational	**Review Status**	**AVs Available**	**AVs Awarded**	**Adjustments**	**Net AVs**	**AV**
Workforce Strategy	Complete	1.00	1.00	0.00	1.00	100%
Section 01 - Budget	Complete	1.00	1.00	0.00	1.00	100%
Section 02 - Governance	Complete	1.00	1.00	0.00	1.00	100%
Section 03 - Financial Sustainability	Complete	1.00	1.00	0.00	1.00	100%
Section 04 - Cultural Competency & Health Literacy	Complete	1.00	1.00	0.00	1.00	100%
Section 05 - IT Systems and Processes	Complete	N/A	N/A	N/A	N/A	N/A
Section 06 - Performance Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Section 07 - Practitioner Engagement	Complete	N/A	N/A	N/A	N/A	N/A
Section 08 - Population Health Management	Complete	N/A	N/A	N/A	N/A	N/A
Section 09 - Clinical Integration	Complete	N/A	N/A	N/A	N/A	N/A
Section 10 - General Project Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Total	**Complete**	**5.00**	**5.00**	**0.00**	**5.00**	**100%**

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

Workforce Strategy							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Workforce Strategy Budget Updates							

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

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Additional Workforce Strategy Budget Updates (non AV-driving)	🔴	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	
	🔴	2. Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing	
	🔴	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing	1
	🟢	4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	N/A	N/A	In Process	Pass & Ongoing	
	🔴	5. Develop training strategy	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Additional Workforce Strategy Topic Areas	🔴					N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total						**1**

Section 01 - Budget						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
	🟢	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete	

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Quarterly Project Reports, Project Budget and Flow of Funds	🟢	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing
	🟢	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete
	🟢	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

The right column (AV Awarded) shows **1** for the Quarterly section.

Total	**1**

Section 02 - Governance						
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Governance Structure	🟢	1. Finalize governance structure and sub-committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	
	🟢	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	

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Updates							1
	🟢	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process Update	🟢	4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
Additional Governance Milestones (non AV-driving)	🔴	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	6. Finalize partnership agreements or contracts with CBOs	N/A	6/30/2016	In Process	Pass & Ongoing	
	🔴	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	9/30/2016	In Process	Pass & Ongoing	
	🔴	8. Finalize workforce communication and engagement plan	N/A	6/30/2016	In Process	Pass & Ongoing	

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	●	9. Inclusion of CBOs in PPS Implementation	N/A	12/31/2015	Completed	Pass & Complete
Additional Governance Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							1

Section 03 - Financial Sustainability

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Financial Stability Update	●	1. Finalize PPS finance structure, including reporting structure	12/31/2015	9/30/2015	Completed	Pass & Complete	
	●	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	Completed	Pass & Complete	1
PPS Transition to Value Based Payment System	●	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	
	●	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	In Process	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	

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Additional PPS Transition to Value Based Payment System	🟢	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
	🟢	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	
Additional Financial Stability Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

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			Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							1

Section 04 - Cultural Competency & Health Literacy							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Cultural Competency /Health Literacy	●	1. Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete	1
	●	2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	6/30/2016	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	
Additional	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

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Cultural Competency /Health Literacy Topic Areas	●						N/A
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 05 - IT Systems and Processes							
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	
	●	2. Develop an IT Change Management Strategy.	N/A	3/31/2016	In Process	Pass & Ongoing	
IT Systems							

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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IT Systems and Processes						
IT Systems and Processes	🔴	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	3/31/2016	In Process	Pass & Ongoing
	🔴	4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	In Process	Pass & Ongoing
	🔴	5. Develop a data security and confidentiality plan.	N/A	3/31/2016	In Process	Pass & Ongoing
Additional IT Systems and Processes Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing

The first IT Systems and Processes section shows N/A in the far right column. The Additional IT Systems and Processes Topic Areas section shows N/A in the far right column.

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

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			Total	**0**

Section 06 - Performance Reporting							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performance Reporting	●	1. Establish reporting structure for PPS-wide performance reporting and communication.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	●	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
Additional Performanc	●	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

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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**

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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Additional Practitioner Engagement Topic Areas	🔴						N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 08 - Population Health Management						
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Population	🔴	1. Develop population health management roadmap.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A

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Health	●	2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	In Process	Pass & Ongoing	N/A
Additional Population Health Topic Areas	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	●	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 09 - Clinical Integration

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Clinical Integration	🔴	1. Perform a clinical integration 'needs assessment'.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop a Clinical Integration strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

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●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total						**0**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

The New York Presbyterian Hospital of Queens AV Adjust

AV Adjustment Scoresheet								
Adjustment	AVs Per Project	Total Projects Selected	Total AVs Available	Total AVs Awarded		Adjusted AVs	Net AVs Awarded	
				Net Awarded	Percentage AV		Net Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%
Project Adjustments (applied to one project only)	Various	9.00	105.00	105.00	100%	0.00	105.00	100%
Total			**150.00**	**150.00**	**100%**	**0.00**	**150.00**	**100%**

Hide Reviewer Comments

☐ Organizational   ☐ Project Adjustments

No AV Adjustments
🔴 *Please note that there are no AV adjustments for The New York Presbyterian Hospital of Queens in DY1, Q3*

🟢

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.a.ii

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.ii
Project Title	Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the New York State Health Innovation Plan (SHIP))

Payment Snapshot		
Payment Available (DY1)	$	219,518.59
DY1 Initial Payment	$	131,711.16
DY1 Q2 Payment Earned	$	43,903.72
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	43,903.72
Funding Available for Distribution DY1Q3	$	-

2.a.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%		
	Project Implementation Speed	N/A	0.00	0.00	0%			-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	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%**	**0%**	**-**	**-**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 2.a.ii AVs Awarded: 21 out of 21

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.a.ii

Save & Return

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🔴	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	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Identify a physician champion with knowledge of PCMH/APCM implementation for each primary care practice included in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.a.ii

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●	4. Ensure all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	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 participating safety net providers.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	9. Implement open access scheduling in all primary care practices.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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

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	Total	0.00

Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.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
●	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

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

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●	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
●	PDI 90– Composite of all measures +/-	Pass & Ongoing	1

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Delivery System Reform Incentive Payment (DSRIP) Program

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

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●	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

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
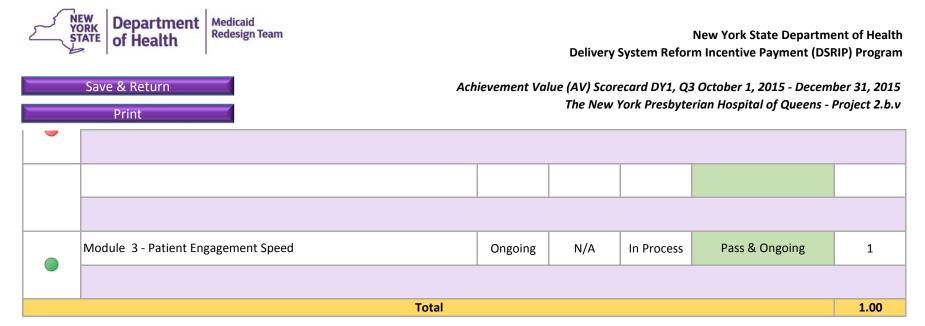*The New York Presbyterian Hospital of Queens - Project 2.a.ii*

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.b.v

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

Payment Snapshot		
Payment Available (DY1)	$	273,470.54
DY1 Initial Payment	$	164,082.32
DY1 Q2 Payment Earned	$	54,694.11
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	54,694.11
Funding Available for Distribution DY1Q3	$	-

2.b.v Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	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%**	**0%**	**-**	**-**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 2.b.v AVs Awarded: 21 out of 21

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.b.v

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●						
●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

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

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🟢	4. Establish protocols for standardized care record transitions to the SNF staff and medical personnel.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	5. Ensure all participating hospitals and SNFs have shared EHR system capability and HIE/RHIO/SHIN-NY access for electronic transition of medical records by the end of DSRIP Year 3.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	6. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Total					**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.v (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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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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

New York State Department of Health
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●	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
●	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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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●	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
	Total		**15.00**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.b.vii

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

Payment Snapshot		
Payment Available (DY1)	$	245,880.70
DY1 Initial Payment	$	147,528.42
DY1 Q2 Payment Earned	$	49,176.14
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	49,176.14
Funding Available for Distribution DY1Q3	$	-

2.b.vii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	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%**	**0%**	**-**	**-**
	Total	**Complete**	**21.00**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 2.b.vii AVs Awarded: 21 out of 21

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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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.b.vii

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🔴						
🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.vii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2016	3/31/2016	In Process	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Educate all staff on care pathways and INTERACT principles.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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●	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	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)

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 2.b.vii

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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

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●	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
●	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

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

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●			
●	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
Total			**15.00**

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
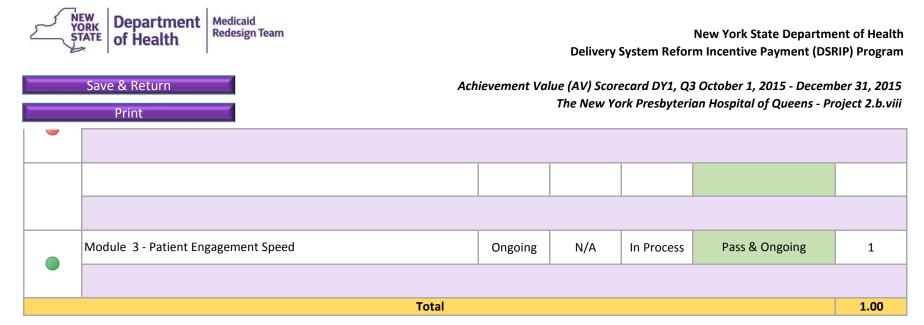*The New York Presbyterian Hospital of Queens - Project 2.b.viii*

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

Payment Snapshot		
Payment Available (DY1)	$	256,254.38
DY1 Initial Payment	$	153,752.63
DY1 Q2 Payment Earned	$	51,250.88
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	51,250.88
Funding Available for Distribution DY1Q3	$	-

2.b.viii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	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%**	**0%**	**-**	**-**
Total		**Complete**	**21.00**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 2.b.viii AVs Awarded: 21 out of 21

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

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					🟩	
🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.viii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
🟢	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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🟢	4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

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●	11. 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
●	12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.viii (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

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	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

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●	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
●	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

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	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
Total			**15.00**

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

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

Payment Snapshot		
Payment Available (DY1)	$	221,280.78
DY1 Initial Payment	$	132,768.47
DY1 Q2 Payment Earned	$	44,256.16
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	44,256.16
Funding Available for Distribution DY1Q3	$	-

3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			**10.00**	**10.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**16.00**	**16.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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	Pass & Ongoing	1
Total						**1**

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3							
☑ 3.a.i Model 1 ☑ 3.a.i Model 2 ☑ 3.a.i Model 3							
Model	**AV Driving**	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	🟢	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	🟢	2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 1							

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	●	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.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
	●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 2	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	●	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.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
	●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	●	9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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3.a.i Model 3	●						
	●	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	●	11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	●	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	●	13. Measure outcomes as required in the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	●	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	●	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	In Process	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)

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AV Driving	Measure	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
🟢	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
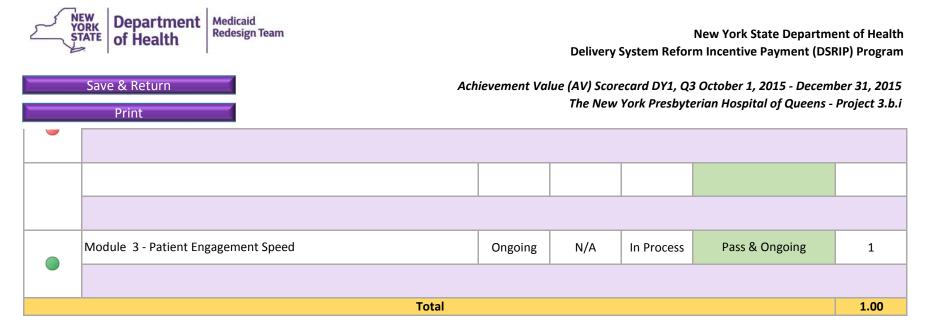*The New York Presbyterian Hospital of Queens - Project 3.a.i*

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🟢	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**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 3.b.i

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

Payment Snapshot		
Payment Available (DY1)	$	165,410.88
DY1 Initial Payment	$	99,246.53
DY1 Q2 Payment Earned	$	33,082.18
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	33,082.18
Funding Available for Distribution DY1Q3	$	-

	3.b.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**7.00**	**7.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**13.00**	**13.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 3.b.i AVs Awarded: 13 out of 13

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

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🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

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**
🟢	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	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

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●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	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).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	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

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●	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	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
●	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 monitoring with follow up support.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	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	In Process	Pass & Ongoing	N/A
●	18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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●	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	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	Pass & Ongoing	1
●	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York Presbyterian Hospital of Queens - Project 3.b.i

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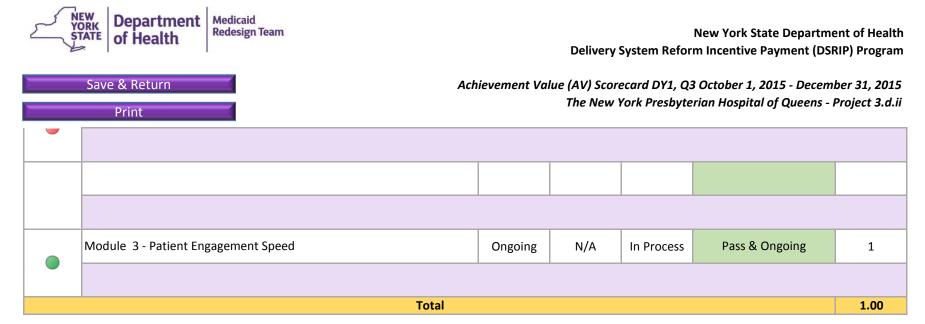
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●	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
●	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	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**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.d.ii
Project Title	Expansion of asthma home-based self-management program

Payment Snapshot		
Payment Available (DY1)	$	178,696.13
DY1 Initial Payment	$	107,217.68
DY1 Q2 Payment Earned	$	35,739.23
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	35,739.23
Funding Available for Distribution DY1Q3	$	-

3.d.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**4.00**	**4.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**10.00**	**10.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 3.d.ii AVs Awarded: 10 out of 10

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

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🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

	Domain 1 Project Prescribed Milestones - Project 3.d.ii					
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
🟢	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	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
🟢	3. Develop and implement evidence-based asthma management guidelines.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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🟢	4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	5. Ensure coordinated care for asthma patients includes social services and support.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
🟢	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.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
🟢	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.ii (all Milestones are P4R in DY1)			
AV Driving	Measure	Reviewer Status	AVs Awarded

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●	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
●	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5
●	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
●	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1
●	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1
	Total		**4.00**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.g.ii
Project Title	Integration of Palliative Care into Nursing Homes

Payment Snapshot		
Payment Available (DY1)	$	157,051.77
DY1 Initial Payment	$	94,231.06
DY1 Q2 Payment Earned	$	31,410.35
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	31,410.35
Funding Available for Distribution DY1Q3	$	-

3.g.ii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			**6.00**	**6.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal			**5.00**	**5.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**11.00**	**11.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 3.g.ii AVs Awarded: 11 out of 11

Hide Reviewer Comments

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

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●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

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

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🟢	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.ii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
🟢	Advanced Directives – Talked about Appointing for Health Decisions	Pass & Ongoing	1
🟢	Depressive feelings - percentage of members who experienced some depression feeling ±	Pass & Ongoing	1
🟢	Percentage of members who had severe or more intense daily pain ±	Pass & Ongoing	1
🟢	Percentage of members who remained stable or demonstrated improvement in pain	Pass & Ongoing	1
🟢	Percentage of members whose pain was not controlled ±	Pass & Ongoing	1

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Total	**5.00**

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

Payment Snapshot		
Payment Available (DY1)	$	119,921.67
DY1 Initial Payment	$	71,953.00
DY1 Q2 Payment Earned	$	23,984.33
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	23,984.33
Funding Available for Distribution DY1Q3	$	-

			4.c.ii Scoresheet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**80%**	**0%**	**-**	**-**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	0%	-	-
	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		**11.00**	**11.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**16.00**	**16.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (all Milestones are P4R in 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

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	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
	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

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🟢	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	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
	Total		**11.00**