

Print Summary

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Achievement Value (AV) Scorecard Westchester Medical Center

PPS Information						
Quarter	DY1, Q2 July 1, 2015 - September 30, 2015					
PPS	Westchester Medical Center					
PPS Number	21					

	Achieve	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)	5.00	5.00	0.00	5.00	Organizational funds are embedded within each project's payment			
2.a.i	20.00	20.00	0.00	20.00	\$1,101,546.82	\$1,101,546.82	\$-	\$1,101,546.82
2.a.iii	21.00	21.00	0.00	21.00	\$904,842.03	\$904,842.03	\$-	\$904,842.03
2.a.iv	21.00	21.00	0.00	21.00	\$1,062,205.86	\$1,062,205.86	\$-	\$1,062,205.86
2.b.iv	21.00	21.00	0.00	21.00	\$845,830.59	\$845,830.59	\$-	\$845,830.59
2.d.i	10.00	9.00	0.00	9.00	\$979,235.98	\$897,632.98	\$-	\$897,632.98
3.a.i	16.00	16.00	0.00	16.00	\$758,383.35	\$758,383.35	\$-	\$758,383.35
3.a.ii	16.00	16.00	0.00	16.00	\$727,807.72	\$727,807.72	\$-	\$727,807.72
3.c.i	12.00	12.00	0.00	12.00	\$590,114.37	\$590,114.37	\$-	\$590,114.37
3.d.iii	10.00	10.00	0.00	10.00	\$609,784.85	\$609,784.85	\$-	\$609,784.85
4.b.i	14.00	14.00	0.00	14.00	\$452,421.01	\$452,421.01	\$ -	\$452,421.01
4.b.ii	21.00	21.00	0.00	21.00	\$334,398.14	\$334,398.14	\$-	\$334,398.14

NEW YORK STATE of Health Medicaid Redesign Team	New York State Department of Delivery System Reform Incentive Payment (DSRIP) Pr					
Print Summary Print All				Achievement Value (AV Westchester Me	-	
AV Adjustments (Column F)						
Total	182.00	181.00	0.00	671.00 \$8,366,571 \$8,284,968 \$ -	\$8,284,968	



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Domain 1 Organizational AVs

Do	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

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Workforce Strategy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		 Define target workforce state (in line with DSRIP program's goals) 	N/A Page	3 N/A	In Process	Pass & Ongoing		



Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Domain 1 Organizational AVs Print 2. Create a workforce transition roadmap N/A N/A In Process Pass & Ongoing for achieving defined target workforce 3. Perform detailed gap analysis between Additional current state assessment of workforce N/A N/A Pass & Ongoing In Process Workforce and projected future state Strategy Budget 1 Updates 4. Produce a compensation and benefit (non AVanalysis, covering impacts on both driving) retrained and redeployed staff, as well as N/A N/A Pass & Ongoing In Process new hires, particularly focusing on full and partial placements 5. Develop training strategy N/A N/A Pass & Ongoing In Process \bigcirc Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A In Process Pass & Ongoing Workstreams **Roles and Responsibilities** Pass & Ongoing N/A N/A In Process Additional Workforce N/A Strategy N/A Pass & Ongoing Key Stakeholders N/A In Process Topic Areas Page 4



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

		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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			Total				1
			Section 02 - G				
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize governance structure and sub- committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Structure		2. 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	6/30/2016	In Process	Pass & Ongoing	
		6. Finalize partnership agreements or contracts with CBOs	N/A	3/31/2016	In Process	Pass & Ongoing	
Additional							
Additional Governance Milestones (non AV- driving)		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	12/31/2015	In Process	Pass & Ongoing	N/A



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

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		8. Finalize workforce communication and engagement plan	N/A	3/31/2017	In Process	Pass & Ongoing
		9. Inclusion of CBOs in PPS Implementation	N/A	3/31/2016	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
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Additional						
Governance		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			



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		Sec	ction 03 - Financi	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Financial Stability		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	
Update							
-		 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		 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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			Total				1
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
				•	•		
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
Additional Financial							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	
		terms of total dollars) captured in at least Level 1 VBPs, and \geq 70% of total costs	TBD	N/A	N/A	N/A	
System		8. ≥90% of total MCO-PPS payments (in					
Based Payment							
Transition to Value		Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	TBD	N/A	N/A	N/A	N/A
PPS		7. Contract 50% of care-costs through					

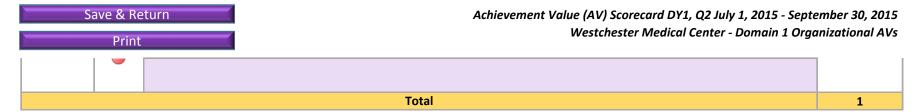


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		Section 04	- Cultural Compe	tency & Health I	Literacy		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Finalize cultural competency / health literacy strategy. 	12/31/2015	12/31/2015	In Process	Pass & Ongoing	
Cultural							
Competency /Health Literacy		 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	Not Started	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							N/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	





	Section 05 - IT Systems and Processes										
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded				
IT Systems and		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	12/31/2016	In Process	Pass & Ongoing					
		 Develop an IT Change Management Strategy. 	N/A	12/31/2016	Not Started	Pass & Ongoing					
		 Develop roadmap to achieving clinical data sharing and interoperable systems 	N/A	12/31/2016	In Process	Pass & Ongoing	N/A				
Processes		across PPS network									
		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	3/31/2017	In Process	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	NI (A
and Processes						N/A
Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

	Section 06 - Performance Reporting										
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded				
		 Establish reporting structure for PPS- wide performance reporting and communication. 	N/A	9/30/2016	In Process	Pass & Ongoing	N/A				
Performanc e Reporting											
		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	6/30/2016	Not Started	Pass & Ongoing	N/A				
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing					
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		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing			
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing			
Additional Performanc				ч	ч		N/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								

		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	3/31/2016	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 Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded					
		 Develop population health management roadmap. 	N/A	3/31/2018	In Process	Pass & Ongoing	N/A					
Population							N/A					
Health		2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2020	In Process	Pass & Ongoing	N/A					



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	Print				Westchester	Medical Center - Domain 1 Orga	
		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 Population							N/A
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					
		1. Perform a clinical integration 'needs assessment'.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A					
Clinical							IN/A					



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Integration	 2. Develop a Clinical Integration strategy.	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	
	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 Clinical						N/A
Integration 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



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.a.i

Project Snapshot			Payment Snapshot					
Project Domain	System Transformation Projects (Domain 2)	1	Payment Available (DY1)	\$	5,507,734.08			
Project ID	2.a.i	1	DY1 Payment Earned to Date	\$	3,304,640.45			
	Create an Integrated Delivery System focused on	1	DY1 Payment Not Earned to Date	\$	-			
Project Title	Evidence Based Medicine and Population Health		DY1 Funding Remaining	\$	2,203,093.63			
	Management		Funding Available for Distribution DY1Q2	\$	1,101,546.82			

			2.a.i 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	5.00	5.00	100%			550,773	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%		550,773
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	550,773	550,773
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	550,773	550,773
Domain 2	Domain 2 Pay for Performance (P4P)		N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal	15.00	15.00	100%	20%	10%	550,773	550,773	
	Total	Complete	20.00	20.00	100%	100%	20%	1,101,547	1,101,547

Total Project 2.a.i AVs Awarded: 20 out of 20

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	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				
		1								
Total						0.00				
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Project Requirement and Metric/Deliverable	Demuined				
	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awardee
providers must be included in the Integrated Delivery System. buld include all medical, behavioral, post-acute, long-term ommunity-based service providers within the PPS network; y, the IDS structure must include payers and social service ons, as necessary to support its strategy.	3/31/2018	12/31/2016	In Process	Pass & Ongoing	N/A
artnering HH and ACO population health management d capabilities to implement the PPS' strategy towards to an IDS.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
patients receive appropriate health care and community cluding medical and behavioral health, post-acute care, long and public health services.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
that all PPS safety net providers are actively sharing EHR th local health information exchange/RHIO/SHIN-NY and alth information among clinical partners, including directed secure messaging), alerts and patient record look up, by the nonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
hat EHR systems used by participating safety net providers ningful Use and PCMH Level 3 standards and/or APCM by the nonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
population health management by actively using EHRs and atforms, including use of targeted patient registries, for all ng safety net providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
ningfu nonstr popu atform	Use and PCMH Level 3 standards and/or APCM by the ation Year 3. Iation health management by actively using EHRs and is, including use of targeted patient registries, for all	I Use and PCMH Level 3 standards and/or APCM by the ation Year 3. 3/31/2018 Iation health management by actively using EHRs and is, including use of targeted patient registries, for all 3/31/2018	Use and PCMH Level 3 standards and/or APCM by the 3/31/2018 3/31/2018 ation Year 3. 3/31/2018 International standards and/or APCM by the 3/31/2018 3/318 3/318 3/31/2018 3/31/2018 3/318 3	I Use and PCMH Level 3 standards and/or APCM by the ation Year 3. 3/31/2018 3/31/2018 In Process Iation health management by actively using EHRs and is, including use of targeted patient registries, for all 3/31/2018 3/31/2018 In Process	I Use and PCMH Level 3 standards and/or APCM by the 3/31/2018 3/31/2018 In Process Pass & Ongoing Pass & Ongoing In Process Pass & Ongoing Iteration Year 3.



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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	3/31/2017	In Process	Pass & Ongoing	N/A
		I				
	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
	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 and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	12/31/2016	In Process	Pass & Ongoing	N/A
Total						

	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



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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
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
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NEW VORK of Health Medicaid Redesign Team Del	New York State Department of very System Reform Incentive Payment (DSRIP) Pi	
Save & Return Achievement Value (Print	AV) Scorecard DY1, Q2 July 1, 2015 - September 30 Westchester Medical Center - Projec	
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total	1	5.00



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.a.iii

Project Snapshot		Payment Snapshot					
Project Domain	System Transformation Projects (Domain 2)	Payment Available (DY1)	\$	4,524,210.14			
Project ID	2.a.iii	DY1 Payment Earned to Date	\$	2,714,526.08			
	Health Home At-Risk Intervention Program:	DY1 Payment Not Earned to Date	\$	-			
Ducto et Title	Proactive management of higher risk patients not	DY1 Funding Remaining	\$	1,809,684.06			
Project Title	currently eligible for Health Homes through access to high quality primary care and support services	Funding Available for Distribution DY1Q2	\$	904,842.03			

	2.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	5.00	5.00	100%	80%	80%										
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			80% 10%	452,421	452,421							
	Patient Engagement Speed	Complete	1.00	1.00	100%												
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	452,421	452,421								
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	452,421	452,421								
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%	452,421	452,421								
Total Complete		21.00	21.00	100%	100%	20%	904,842	904,842									

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

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.iii									
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 23									



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AVs Awarded

N/A

N/A

N/A

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Print			West	chester Medical Cent
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing
Total				
Domain 1 Project Prescr				
Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status
1. Develop a Health Home At-Risk Intervention Program, utilizing				
participating HHs as well as PCMH/APC PCPs in care coordination w the program.	vithin 3/31/2018	3/31/2017	In Process	Pass & Ongoing
2. Ensure all primary care providers participating in the project me	et			
NCQA (2011) accredited Patient Centered Medical Home, Level 3	, 3/31/2018	3/31/2018	In Process	Pass & Ongoing
standards and will achieve NCQA 2014 Level 3 PCMH and/or Advan	iced	3,31,2010		
Primary Care accreditation by Demonstration Year (DY) 3.				
3. Ensure that all participating safety net providers are actively sha	-			
EHR systems with local health information exchange/RHIO/SHIN-N sharing health information among clinical partners, including direct	1 3/31/2018	3/31/2018	In Process	Pass & Ongoing

exchange (secure messaging), alerts and patient record look up. 4. Ensure that EHR systems used by participating safety net providers 3/31/2018 3/31/2018 Pass & Ongoing In Process N/A meet Meaningful Use and PCMH Level 3 standards and/or APCM. 5. 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 Pass & Ongoing N/A In Process participating safety net providers. 6. Develop a comprehensive care management plan for each patient to Page 243/31/2018 3/31/2018 N/A In Process Pass & Ongoing engage him/her in care and to reduce patient risk factors.

AV Driving

2015 - September 30, 2015 lical Center - Project 2.a.iii



Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2 Westchester Medical Center - Project 2					
Print			West	chester Meulcul Center - P	ioject z.u.m
7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services.Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2018	3/31/2017	In Process	Pass & Ongoing	N/A
 Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population. 	3/31/2018	3/31/2017	Not Started	Pass & Ongoing	N/A
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iii (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



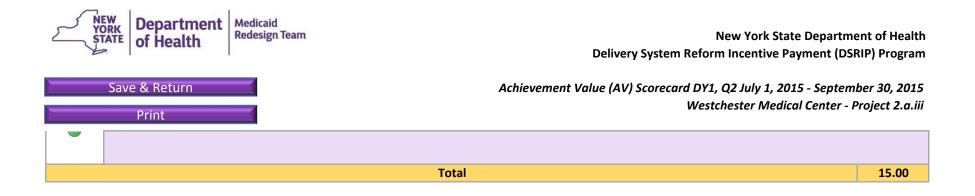
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CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	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
		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



Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September Westchester Medical Center - Pro			
Print	stchester Medical Center - F	roject 2.a.ili	
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	





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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.a.iv

Project Snapshot			Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)		Payment Available (DY1)	\$ 5,311,029.30
Project ID	2.a.iv	1	DY1 Payment Earned to Date	\$ 3,186,617.58
	Create a medical village using existing hospital	1	DY1 Payment Not Earned to Date	\$ -
Project Title	infrastructure		DY1 Funding Remaining	\$ 2,124,411.72
			Funding Available for Distribution DY1Q2	\$ 1,062,205.86

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	5.00	5.00	100%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	531,103	531,103	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	531,103	531,103	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	531,103	531,103	
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%	531,103	531,103	
	Total	Complete	21.00	21.00	100%	100%	20%	1,062,206	1,062,206	

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

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.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		
					·	-		



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

Pass & Ongoing

1

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Module 3 - Patient Engagement Speed	

Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.a.iv

In Process

	Total Domain 1 Project Prescribed I	Vilestones - F	voiest 2 e iv			1.00
		Vilestones - F	voiest 2 e iv			
		villescones - r				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
servic	nvert outdated or unneeded hospital capacity into an outpatient es center, stand-alone emergency department/urgent care center ner healthcare-related purpose.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
reduc	vide a detailed timeline documenting the specifics of bed tion and rationale. Specified bed reduction proposed in the ct must include active or "staffed" beds.	3/31/2019	3/31/2017	Not Started	Pass & Ongoing	N/A
accred	ure that all participating PCPs meet NCQA 2014 Level 3 PCMH ditation and/or meet state-determined criteria for Advanced ry Care Models by the end of DSRIP Year 3.	3/31/2019	3/31/2018	In Process	Pass & Ongoing	N/A
are ac excha partne	ure that all safety net providers participating in Medical Villages tively sharing EHR systems with local health information nge/RHIO/SHIN-NY and sharing health information among clinical ers, including direct exchange (secure messaging), alerts and nt record look up.	3/31/2019	3/31/2018	In Process	Pass & Ongoing	N/A
	EHRs and other technical platforms to track all patients engaged project.	3/31/2019	3/31/2017	In Process	Pass & Ongoing	N/A

Ongoing

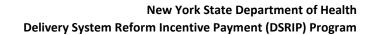
N/A

6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2 Page 3 3 31/2019 3/31/2017 In Process Pass & Ongoing N/A



Save & Return	Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 3				
Print			West	tchester Medical Center - P	roject 2.a.iv
7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive communitienceds assessment.		3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iv (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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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
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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Total		15.00
		0.0
 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		_
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.b.iv

Project Snapshot			Payment Snapshot					
Project Domain	System Transformation Projects (Domain 2)		Payment Available (DY1)	\$	4,229,152.96			
Project ID	2.b.iv		DY1 Payment Earned to Date	\$	2,537,491.77			
	Care transitions intervention patients with a care transition plan developed prior to discharge.		DY1 Payment Not Earned to Date	\$	-			
Project Title			DY1 Funding Remaining	\$	1,691,661.18			
		Funding Available for Distribution DY1Q2	\$	845,830.59				

	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	5.00	5.00	100%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	422,915	422,915	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal			6.00	100%	80%	10%	422,915	422,915	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	10%	422,915	422,915	
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%	422,915	422,915	
Total Complete			21.00	21.00	100%	100%	20%	845,831	845,831	

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

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		
						-		



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

	Domain 1 Project Prescribed N	Vilestones - F	Project 2.b.iv			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	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 appropriate post-discharge protocols are followed. 	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	Not Started	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	Not Started	Pass & Ongoing	N/A
	5. 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	Not Started	Pass & Ongoing	N/A
	De es a					



Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September						-
	Print			West	tchester Medical Center - F	Project 2.b.iv
	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 Report	ing - Project 2.	b.iv (all Miles	tones are P4	R in DY1)	
AV Driving	Measure				Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years				Pass & Ongoing	0.33333333

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 0.25	Save & Return Print	Achievement Value (AV) Scorecard DY1 West	, Q2 July 1, 2015 - Septeml cchester Medical Center - P	-
	Children's Access to Primary	Care- 7 to 11 years	Pass & Ongoing	0.25

		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
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Dago 27		



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Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-Freimbursement	FS 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



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.d.i

Project Snapshot		Payment Snapshot						
Project Domain	System Transformation Projects (Domain 2)	Payment Available (DY1)	\$	4,896,179.91				
Project ID	2.d.i	DY1 Payment Earned to Date	\$	2,937,707.95				
	Implementation of Patient Activation Activities to	DY1 Payment Not Earned to Date	\$	-				
Project Title	Engage, Educate and Integrate the uninsured and	DY1 Funding Remaining	\$	1,958,471.96				
	low/non-utilizing Medicaid populations into Community Based Care	Funding Available for Distribution DY1Q2	\$	979,235.98				

		2.d.i 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	5.00	5.00	100%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80% 1	80%	80%	80% 10%	10%	489,618	408,015
	Patient Engagement Speed	Complete	1.00	0.00	0%							
Domain 1 Subtotal			6.00	5.00	83%	80%	10%	489,618	408,015			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	489,618	489,618			
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-			
Domain 2 Subtotal		4.00	4.00	100%	20%	10%	489,618	489,618				
Total Complete			10.00	9.00	90%	100%	20%	979,236	897,633			

Total Project 2.d.i AVs Awarded: 9 out of 10

	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	9										



literacy, and cultural competency.

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

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0.00

AVs Awarded

N/A

N/A

N/A

N/A

N/A

Save & Return Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 2.d.i Print Module 3 - Patient Engagement Speed Ongoing N/A In Process Fail The PPS failed to meet at least 80% of its actively engaged commitments for DY1, Q2. Total Domain 1 Project Prescribed Milestones - Project 2.d.i Required Committed Milestone **AV Driving Project Requirement and Metric/Deliverable Reviewer Status** Due Date Due Date Status 1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM[®] and other patient activation 3/31/2017 3/31/2019 Pass & Ongoing In Process techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate. 2. Establish a PPS-wide training team, comprised of members with 3/31/2017 3/31/2016 In Process Pass & Ongoing training in PAM[®] and expertise in patient activation and engagement. 3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified 3/31/2017 3/31/2017 In Process Pass & Ongoing "hot spot" areas. 4. Survey the targeted population about healthcare needs in the PPS' 3/31/2017 3/31/2017 Not Started Pass & Ongoing region. 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health 3/31/2017 3/31/2019 In Process Pass & Ongoing

6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect 3/31/2017 Pass & Ongoing 3/31/2017 In Process N/A beneficiaries to his/her designated PCP (see outcome measurements in



Save & Return	Achievement	: Value (AV) S		, Q2 July 1, 2015 - Septem stchester Medical Center -	
Print			Wes	sichester Medical Center -	Project 2.u.i
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.	3/31/2017	9/30/2019	In Process	Pass & Ongoing	N/A
 8. Include beneficiaries in development team to promote preventive 					
care.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
9. Measure PAM [®] components	3/31/2017	3/31/2019	In Process	Pass & Ongoing	N/A
10. Increase the volume of non-emergent (primary, behavioral, dental care provided to UI, NU, and LU persons.	3/31/2017	3/31/2019	In Process	Pass & Ongoing	N/A
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.	3/31/2017	3/31/2019	In Process	Pass & Ongoing	N/A
12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM [®] .	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A

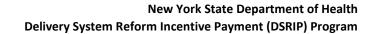


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	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services	3/31/2017	3/31/2019	In Process	Pass & Ongoing	N/A			
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2019	Not Started	Pass & Ongoing	N/A			
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2017	3/31/2019	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A			
Total 0.									

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.d.i (all Milestones are P4R in DY1)									
AV Driving	Measure	Reviewer Status	AVs Awarded							
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25							
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25							
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25							





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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



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Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 3.a.i

Project Snapshot		Payment Snapshot		
Project Domain	Clinical Improvement Projects (Domain 3)		Payment Available (DY1)	\$ 3,791,916.75
Project ID	3.a.i		DY1 Payment Earned to Date	\$ 2,275,150.05
Project Title	Integration of primary care and behavioral health		DY1 Payment Not Earned to Date	\$ -
	Integration of primary care and behavioral health		DY1 Funding Remaining	\$ 1,516,766.70
	services		Funding Available for Distribution DY1Q2	\$ 758,383.35

Domain Component I		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	5.00	5.00	100%	80%	80%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				10%	379,192	379,192	
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal			6.00	100%	80%	10%	379,192	379,192			
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	379,192	379,192			
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-			
	Domain 3 Subtotal		10.00	10.00	100%	20%	10%	379,192	379,192			
	Total Complete			16.00	100%	100%	20%	758,383	758,383			

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

	Module 3	3 - Patie	ent Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total								1
			Domain 1 Project Prescribed Milestone	es - Project 3.	.a.i Models 1,	2 and 3		
			✓ 3.a.i Model 1 ✓ 3.a.i	i Model 2	✓ 3.a.i Model 3	}		
Mode	el	AV riving	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					

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.	3/31/2018	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	3/31/2020	On Hold	Pass & Ongoing	N/A



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		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2018	3/31/2020	On Hold	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	3/31/2020	On Hold	Pass & Ongoing	N/A
	•	8. 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
		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	6				



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	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		



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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) \pm	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10



Save & Return Print Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 3.a.ii

	Project Snapshot		Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)		Payment Available (DY1)	\$ 3,639,038.59
Project ID	3.a.ii	1	DY1 Payment Earned to Date	\$ 2,183,423.15
	Behavioral health community crisis stabilization		DY1 Payment Not Earned to Date	\$ -
Project Title			DY1 Funding Remaining	\$ 1,455,615.44
	services		Funding Available for Distribution DY1Q2	\$ 727,807.72

			3.a.ii Score	esheet					
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	5.00	5.00	100%		10%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%		363,904	363,904
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	363,904	363,904
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	363,904	363,904
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		10.00	10.00	100%	20%	10%	363,904	363,904
	Total Complete			16.00	100%	100%	20%	727,808	727,808

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

	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
					·	-



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Module 3 - Patient Engagement

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

	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	3/31/2019	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	3/31/2019	Not Started	Pass & Ongoing	N/A
	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	3/31/2019	In Process	Pass & Ongoing	NA
	 Develop written treatment protocols with consensus from participating providers and facilities. 	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA
	5. Include at least one hospital with specialty psychiatric services and					
	crisis-oriented psychiatric services; expansion of access to specialty	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA
	psychiatric and crisis-oriented services.					
	6. Expand access to observation unit within hospital outpatient or at an					
	off campus crisis residence for stabilization monitoring services (up to	3/31/2018	3/31/2019	In Process	Pass & Ongoing	NA
	48 hours).	, - ,	, - ,			
	Page 5	50				



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Total						
	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA
		1				
	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2018	3/31/2017	In Process	Pass & Ongoing	NA
	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2019	In Process	Pass & Ongoing	NA
	exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.					
	share health information among clinical partners, including direct	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and					
	using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2019	In Process	Pass & Ongoing	NA
	7. Deploy mobile crisis team(s) to provide crisis stabilization services	3/31/2018	3/31/2019	In Process	Pass & Ongoing	

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.ii (all Milestones are P4R in DY1)							
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					
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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



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

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) \pm	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00



Save & Return Print Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 3.c.i

Project Snapshot		Payment Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)	Payment Available (DY1)	\$	2,950,571.83		
Project ID	3.c.i	DY1 Payment Earned to Date		1770343.099		
	Evidence-based strategies for disease	DY1 Payment Not Earned to Date	\$	-		
Project Title	management in high risk/affected populations.	DY1 Funding Remaining	\$	1,180,228.73		
	(adult only)	Funding Available for Distribution DY1Q2	\$	590,114.37		

	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	5.00	5.00	100%	80%	80%	80%								
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				10%	295,057	295,057					
	Patient Engagement Speed	#REF!	1.00	1.00	100%											
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	295,057	295,057							
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	20%	10%	295,057	295,057							
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-							
	Domain 2 Subtotal			6.00	100%	20%	10%	295,057	295,057							
	Total	#REF!	12.00	12.00	100%	100%	20%	590,114	590,114							

Total Project 3.c.i AVs Awarded: 12 out of 12

	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		
		-	-	-				



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AVs Awarded

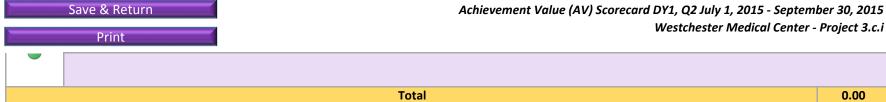
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	Print			Wes	tchester Medical Cer
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing
	Total				
	Domain 1 Project Prescribed	Milestones -	Project 3.c.i		
AV Driving	Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status
	1. Implement evidence-based best practices for disease management, specific to community and ambulatory care settings.	o diabetes, in	3/31/2017	In Process	Pass & Ongoing
	2. Engage at least 80% of primary care providers within the PPS in the implement disease management evidence-based best practices.	tation of	3/31/2017	Not Started	Pass & Ongoing
	3. Develop care coordination teams (including diabetes educators, nursing staff, health providers, pharmacy, community health workers, and Health Home care n		3/31/2017	Not Started	Pass & Ongoing

2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Not Started	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 improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Not Started	Pass & Ongoing	N/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.	3/31/2017	In Process	Pass & Ongoing	N/A
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	In Process	Pass & Ongoing	N/A
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	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 55	3/31/2017	In Process	Pass & Ongoing	N/A
	 disease management evidence-based best practices. 3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management. 4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods. 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. 6. Use EHRs or other technical platforms to track all patients engaged in this project. 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of 	disease management evidence-based best practices. 3/31/2017 3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management. 3/31/2017 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. 3/31/2017 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. 3/31/2017 6. Use EHRs or other technical platforms to track all patients engaged in this project. 3/31/2017 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of 3/31/2017 3/31/2017	disease management evidence-based best practices. 3/31/2017 Not Started 3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management. 3/31/2017 Not Started 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. 3/31/2017 In Process 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. 3/31/2017 In Process 6. Use EHRs or other technical platforms to track all patients engaged in this project. 3/31/2017 In Process 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of 7. 3/31/2017 In Process	disease management evidence-based best practices. 3/31/2017 Not Started Pass & Ongoing 3/31/2017 In Process Pass & Ongoing 4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods. 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. 6. Use EHRs or other technical platforms to track all patients engaged in this project. 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of 7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of

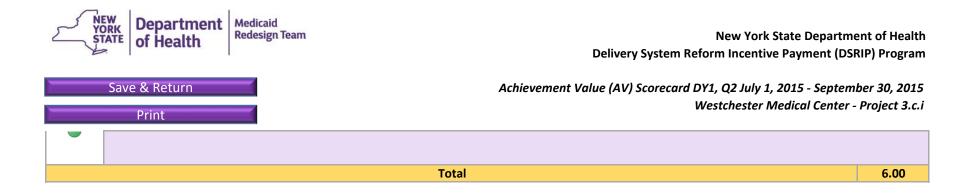
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	Domain 3 Pay for Performance and Pay for Reporting - Project 3.c.i (all Milestones are P4R	in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) \pm	Pass & Ongoing	1
	Comprehensive Diabetes screening – All Four Tests	Pass & Ongoing	1
	(HbA1c, lipid profile, dilated eye exam, nephropathy monitor)		
	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 56	Pass & Ongoing	1

Westchester Medical Center - Project 3.c.i





Save & Return Print Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 3.d.iii

	Project Snapshot	Payment Snapsho	ot	
Project Domain	Clinical Improvement Projects (Domain 3)	Payment Available (DY1)	\$	3,048,924.23
Project ID	3.d.iii	DY1 Payment Earned to Date	\$	1,829,354.54
	Implementation of evidence-based medicine guidelines for asthma management	DY1 Payment Not Earned to Date	\$	-
Project Title		DY1 Funding Remaining	\$	1,219,569.69
		Funding Available for Distribution DY1Q2	\$	609,784.85

			3.d.iii Score	esheet												
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	5.00	5.00	100%	80%										
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	304,892	304,892							
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	304,892	304,892							
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	304,892	304,892							
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-							
	Domain 2 Subtotal			4.00	100%	20%	10%	304,892	304,892							
	Total	Complete	10.00	10.00	100%	100%	20%	609,785	609,785							

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

	Domain 1 Project Milestones - Project 3.d.iii									
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, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 3.d.iii

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

	Domain 1 Project Prescribed N	Vilestones - F	Project 3.d.iii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine. 	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	 Deliver educational activities addressing asthma management to participating primary care providers. 	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	 Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population. 	3/31/2017	3/31/2016	In Process	Pass & Ongoing	N/A
	5. 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
	Total					0.00

 Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.iii (all Milestones are P4R in DY1)

 AV Driving
 Measure
 Page 59
 Reviewer Status
 AV 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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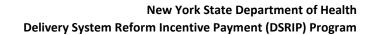
Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 4.b.i

Project Snapshot			Payment Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's		Payment Available (DY1)	\$ 2,262,105.07
Project ID	4.b.i		DY1 Payment Earned to Date	\$ 1,357,263.04
	Promote Tobacco Use Cessation, especially among		DY1 Payment Not Earned to Date	\$ -
Project Title	low SES populations and those with poor mental		DY1 Funding Remaining	\$ 904,842.03
	health		Funding Available for Distribution DY1Q2	\$ 452,421.01

			4.b.i 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	5.00	5.00	100%	80%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	226,211	226,211				
	Patient Engagement Speed	N/A	0.00	0.00	0%								
	Domain 1 Subtotal		5.00	5.00	100%	80%	10%	226,211	226,211				
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	20%	10%	226,211	226,211				
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%	226,211	226,211				
	Total	Complete	14.00	14.00	100%	100%	20%	452,421	452,421				

Total Project 4.b.i AVs Awarded: 14 out of 14

	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					





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Total		9.00
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	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
 Age edjusted percentage of edults who have a regular health care provider. Aged 181 years	Doce & Ongoing	
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
 Dercentage of promoture depth (hofers age (E veges)	Dass & Ongoing	1
		-
Percentage of cigarette smoking among adults	Pass & Ongoing	1



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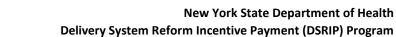
Achievement Value (AV) Scorecard DY1, Q2 July 1, 2015 - September 30, 2015 Westchester Medical Center - Project 4.b.ii

Project Snapshot		Payment Snapshot				
Project Domain	Domain 4: Population-wide Projects: New York's	Payment Available (DY1)	\$	1,671,990.70		
Project ID	4.b.ii	DY1 Payment Earned to Date	\$	1,003,194.42		
	Increase Access to High Quality Chronic Disease	DY1 Payment Not Earned to Date	\$	-		
Project Title	Preventive Care and Management in Both Clinical	DY1 Funding Remaining	\$	668,796.28		
	and Community Settings	Funding Available for Distribution DY1Q2	\$	334,398.14		

4.b.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	5.00	5.00	100%	80%	10% 167,199		167,199
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			167,199	
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal			5.00	100%	80%	10%	167,199	167,199
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	16.00	16.00	100%	20%	10%	167,199	167,199
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			16.00	100%	20%	10%	167,199	167,199
	Total Complete		21.00	21.00	100%	100%	20%	334,398	334,398

Total Project 4.b.ii AVs Awarded: 21 out of 21

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.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			
	Asthma emergency department visit rate per 10,000	Pass & Ongoing	1			





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Asthma emergency department visit rate per 10,000 - Aged 0-4 years	Pass & Ongoing	1
Percentage of adults who are obese	Pass & Ongoing	1
Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50- 75 years	Pass & Ongoing	1
 Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
 Percentage of children and adolescents who are obese	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 heart attack hospitalization rate per 10,000	Pass & Ongoing	1



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Total				
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	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	
	Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years	Pass & Ongoing	1	
	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1	