

Achievement Value (AV) Scorecard Westchester Medical Center

	General Instructions							
Step	Description/Link	Image						
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	SECURITY WARNING Macros have been disabled. Enable Content						
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.	Print All
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	Project Link (Gifu on the purple files below to access each biofolding project report) Domain in Organizational (All Projects) AV Adjustments (Jollann F) 2 a 1 2 a 11 2 a 10 2 a 10 2 a 10 2 a 10
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.	Hide Reviewer Comments



Achievement Value (AV) Scorecard Westchester Medical Center

Print Summary

Print All

	PPS Information				
Quarter	DY1, Q3 October 1, 2015 - December 31, 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	Organizati	•	e embedded w payment	ithin each
2.a.i	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -
2.a.iii	21.00	21.00	0.00	21.00	\$ -	\$ -	\$ -	\$ -
2.a.iv	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -
2.b.iv	21.00	21.00	0.00	21.00	\$ -	\$ -	\$ -	\$ -
2.d.i	10.00	9.00	0.00	9.00	\$ -	\$ -	\$ -	\$ -
3.a.i	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -
3.a.ii	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -
3.c.i	12.00	12.00	0.00	12.00	\$ -	\$ -	\$ -	\$ -
3.d.iii	10.00	10.00	0.00	10.00	\$ -	\$ -	\$ -	\$ -



Total

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

- \$

- \$

Print Summary Achievement Value (AV) Scorecard Westchester Medical Center Print All 4.b.i 14.00 \$ 14.00 0.00 \$ \$ \$ 14.00 21.00 \$ \$ 4.b.ii 21.00 0.00 \$ \$ 21.00 AV Adjustments (Column F)

0.00

180.00

181.00

180.00 \$

- \$



Save & Return

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

Hide Reviewer Comments

			Workforce S	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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Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing
		•		
Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing
Perform detailed gap analysis between current state assessment of workforce	N/A	N/A	In Process	Pass & Ongoing
and projected future state		14/1	mi rocess	, ass at ongoing
4. Produce a compensation and benefit analysis, covering impacts on both				
retrained and redeployed staff, as well as	N/A	N/A	In Process	Pass & Ongoing
partial placements				
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
	1. Define target workforce state (in line with DSRIP program's goals) 2. Create a workforce transition roadmap for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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 5. Develop training strategy Major Risks to Implementation & Risk	1. Define target workforce state (in line with DSRIP program's goals) 2. Create a workforce transition roadmap for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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 5. Develop training strategy N/A Major Risks to Implementation & Risk Mitigation Strategies N/A	1. Define target workforce state (in line with DSRIP program's goals) 2. Create a workforce transition roadmap for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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 5. Develop training strategy N/A Major Risks to Implementation & Risk Mitigation Strategies N/A N/A	1. Define target workforce state (in line with DSRIP program's goals) 2. Create a workforce transition roadmap for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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 4. Develop training strategy N/A N/A N/A In Process Major Risks to Implementation & Risk Mitigation Strategies N/A N/A N/A In Process



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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 Workforce							N/A
Strategy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	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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		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing
Quarterly						
Project Reports,		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete
Project Budget and						
Flow of Funds		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing
		The amounts and percentages reported in t percentages reported in MAPP. Please upda DY1, Q4 reporting period.	-		_	th the amounts and
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing
			Total			

	Section 02 - Governance							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		1. Finalize governance structure and subcommittee structure	9/30/2015	9/30/2015	Completed	Pass & Complete		



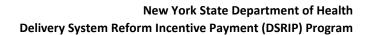
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Governance Structure Updates	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	
·	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	1
Governance Process Update	Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
	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 Governance Milestones (non AV-	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	12/31/2015	Completed	Fail	N/A
driving)	The documentation submitted was insuffici Department of Community Mental Health of				The Westchester County	
	8. Finalize workforce communication and engagement plan	N/A	3/31/2017	In Process	Pass & Ongoing	



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		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							N/A
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	14/1
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1





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		Sec	tion 03 - Financi	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarde
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete	
Financial Stability Update		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	1
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Completed	Pass & Complete	
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	



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		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							
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	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial							N/A
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
	1						



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Domain 1 Organizational AVs

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

		Section 04	- Cultural Compe	tency & Health	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	Completed	Pass & Complete	
Cultural							
Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	6/30/2016	In Process	Pass & Ongoing	1
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	

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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	NA
Topic Areas							
		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	12/31/2016	In Process	Pass & Ongoing					
		2. Develop an IT Change Management Strategy.	N/A	12/31/2016	In Process	Pass & Ongoing					



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T Systems and Processes	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	12/31/2016	In Process	Pass & Ongoing
	Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	12/31/2016	In Process	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
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
Additional					
T Systems	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
end Processes Fopic Areas —					
	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Domain 1 Organizational AVs

	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing

Total 0

		Sec	ction 06 - Perform	nance 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
5 (
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	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	

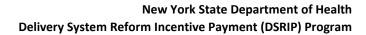


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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

		200111			-	Westchester Medical Center - Domain 1 Organizat					
	Print				Westchester I	Medical Center - Domain 1 Orga	inizational AVs				
Additional Performanc e Reporting Topic Areas							N/A				
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/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	
		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	



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Domain 1 Organizational AVs

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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	1477
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

	Section 08 - Population Health Management									
Process AV Measure Driving		Milestone	Required Due Date	Committed Due Milestone Date Status		Reviewer Status	AV Awarded			
		Develop population health management roadmap.	N/A	3/31/2018	In Process	Pass & Ongoing	N/A			



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Population						18/75
Health	2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2020	In Process	Pass & Ongoing	NI/A
						N/A
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Population						N/A
Health Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/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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			Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Perform a clinical integration 'needs assessment'.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
Clinical							.,,,
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	IN/A
		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 Westchester Medical Center AV Adjustments

	AV	Adjustment	Scoresheet					
	AVs Per Total Total AVs		Total AVs Awarded		N N		AVs Awarded	
Adjustment	Project	Projects	Available	Net	Percentage	Adjusted AVs	Net	Percentage AV
	Project	Selected	Available	Awarded	AV	AVS	Awarded	
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	126.00	125.00	99%	0.00	125.00	99%
Total				180.00	99%	0.00	180.00	99%

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Westchester Medical Center in DY1, Q3



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.a.i

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

Payment Snapshot								
Payment Available (DY1)	\$	5,507,734.08						
DY1 Initial Payment	\$	3,304,640.45						
DY1 Q2 Payment Earned	\$	1,101,546.82						
DY1 Payment Not Earned to Date	\$	0.00						
DY1 Funding Remaining	\$	1,101,546.82						
Funding Available for Distribution DY1Q3	\$	-						

			2.a.i Score	sheet					
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 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	0%	-	-
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
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%	0%	-	-
	Total	Complete	20.00	20.00	100%	100%	0%	-	-

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

Hide Reviewer Comments

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



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	Print			Wes	stchester Medical Center -	Project 2.a.i
Total						0.00
	Domain 1 Project Prescribed	Milestones - I	Proiect 2.a.i			
AV Driving		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	ı	ı			
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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	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,	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	and culturally competent community-based organizations, as					
Total Total						0.00

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

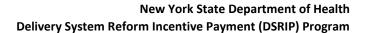
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
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 ±	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
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5



Save & Return Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - D Westchester Medical Cell			
	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 Westchester Medical Center - Project 2.a.iii

Project Snapshot						
Project Domain	System Transformation Projects (Domain 2)					
Project ID	2.a.iii					
Project Title	Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services					

Payment Snapshot					
Payment Available (DY1)	\$	4,524,210.14			
DY1 Initial Payment	\$	2,714,526.08			
DY1 Q2 Payment Earned	\$	904,842.03			
DY1 Payment Not Earned to Date	\$	0.00			
DY1 Funding Remaining	\$	904,842.03			
Funding Available for Distribution DY1Q3	\$	-			

	2.a.iii 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 Organizational	Complete	5.00	5.00	100%	80%																
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		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	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.iii AVs Awarded: 21 out of 21

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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



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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.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A		
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A		



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3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
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.	3/31/2017	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).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	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.a.iii (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					



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



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.a.iii

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

1 BY 30 Composite of all mediates 1,	1 das & Ongoing	
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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Print Westchester Medical Center - Project					
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 Westchester Medical Center - Project 2.a.iv

	Project Snapshot							
Project Domain	Project Domain System Transformation Projects (Domain 2)							
Project ID	2.a.iv							
Project Title	Create a medical village using existing hospital infrastructure							

Payment Snapshot						
Payment Available (DY1)	\$	5,311,029.30				
DY1 Initial Payment	\$	3,186,617.58				
DY1 Q2 Payment Earned	\$	1,062,205.86				
DY1 Payment Not Earned to Date	\$	(0.00)				
DY1 Funding Remaining	\$	1,062,205.86				
Funding Available for Distribution DY1Q3	\$	-				

				esheet					
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 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	0%	-	-
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	80%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
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%	0%	-	-
	Total	Complete	20.00	20.00	100%	100%	0%	-	-

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

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Domain 1 Project Milestones - Project 2.a.iv						
AV Driving	Driving Project Requirement and Metric/Deliverable		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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Print			West	chester Medical Center - I	Project 2.a.iv
	ı	ı			
Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
Total					0.00

Domain 1 Project Prescribed Milestones - Project 2.a.iv						
AV Driving	AV Driving Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Convert outdated or unneeded hospital capacity into an outpatient services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
	Provide a detailed timeline documenting the specifics of bed reduction and rationale. Specified bed reduction proposed in the	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	project must include active or "staffed" beds.	3/31/2017	3/31/2017	111100033	Tuss & Oligonia	IV/A
	3. Ensure that all participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



Print			west	chester Medical Center - P	roject 2.a.iv
4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
5. 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
6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		-			
7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
needs assessment.					
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						



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Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.333333
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



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.a.iv

Print Helpful, Courteous, and Respectful Office Staff (Q24 and 25) Pass & Ongoing 0.5 H-CAHPS – Care Transition Metrics Pass & Ongoing 1 Pass & Ongoing Medicaid Spending on ER and Inpatient Services ± 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 Pass & Ongoing 1 able to participate in bidirectional exchange 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 Pass & Ongoing 1 reimbursement



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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



Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.b.iv

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

Payment Snapshot							
Payment Available (DY1)	\$	4,229,152.96					
DY1 Initial Payment	\$	2,537,491.77					
DY1 Q2 Payment Earned	\$	845,830.59					
DY1 Payment Not Earned to Date	\$	0.00					
DY1 Funding Remaining	\$	845,830.59					
Funding Available for Distribution DY1Q3	\$	-					

			2.b.iv Score	esheet											
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 Organizational	Complete	5.00	5.00	100%	80%	80%	80%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				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	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-						
	Domain 2 Subtotal			15.00	100%	20%	0%	-	-						
	Total	Complete	21.00	21.00	100%	100%	0%	-	-						

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

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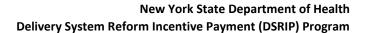
	Domain 1 Project Milestones - Project 2.b.iv							
AV Driving Project Requirement a		Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
		Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process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



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Print			West	tchester Medical Center - F	Project 2.b.iv
	I	I	1		
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total					1.00

Domain 1 Project Prescribed Milestones - Project 2.b.iv						
AV Driving	AV Driving Project Requirement and Metric/Deliverable		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. 	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A





Print			west	chester Medical Center - F	roject 2.b.iv
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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. 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.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					



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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 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



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Print	tchester Medical Center - F	Project 2.b.iv
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

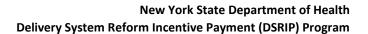


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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.b.iv

Print Potentially Avoidable Emergency

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





Print

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 2.d.i

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

Payment Snapshot						
Payment Available (DY1)	\$	4,896,179.91				
DY1 Initial Payment	\$	2,937,707.95				
DY1 Q2 Payment Earned	\$	897,632.98				
DY1 Payment Not Earned to Date	\$	81,603.00				
DY1 Funding Remaining	\$	979,235.98				
Funding Available for Distribution DY1Q3	\$	-				

			2.d.i Score	sheet						
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 Organizational	Complete	5.00	5.00	100%	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		80% 0%	-	-	
	Patient Engagement Speed	Complete	1.00	0.00	0%					
	Domain 1 Subtotal		6.00	5.00	83%	80%	0%	-	-	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	0%	-	-	
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%	0%	-	-	
	Total	Complete	10.00	9.00	90%	100%	0%	-	-	

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

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	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		





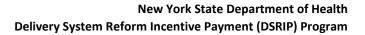
Print				wes	stcnester ivieaicai Center -	Project 2.a.
Module 3 - Patient Engagen	ent Speed	Ongoing	N/A	In Process	Fail	0
The PPS failed to meet at lea engaged numbers.	st 80% of its actively engaged commitments	for DY1Q3.	The documen	tation does n	ot support the reported a	ctively
	Total					0.00

	Domain 1 Project Prescribed	Milestones -	Project 2.d.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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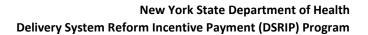
4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health	2/24/2010	2/24/2010	In Dunana	Dags ⁹ Ongoing	N1/A
literacy, and cultural competency.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs.				_	
Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
seriendaries to may her designated i at 1,000 outcome medicarements in					
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	9/30/2019	9/30/2019	In Process	Pass & Ongoing	N/A
towards improvement, must be set for each cohort at the beginning of	3/30/2013	3/30/2013	1111100033	1 ass & Oligonia	11/7
each performance period.					
8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
care.					
9. Measure PAM® components	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
	3,31,2313	0,01,2013			.,,,
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A





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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.	3/31/2019	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	In Process	Pass & Ongoing	N/A
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	3/31/2019	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.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A





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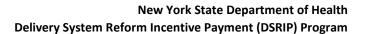
all patients engaged in the project.					
17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

	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
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25
	ED use by uninsured	Pass & Ongoing	1



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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, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 3.a.i

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

Payment Snapshot						
Payment Available (DY1)	\$	3,791,916.75				
DY1 Initial Payment	\$	2,275,150.05				
DY1 Q2 Payment Earned	\$	758,383.35				
DY1 Payment Not Earned to Date	\$	(0.00)				
DY1 Funding Remaining	\$	758,383.35				
Funding Available for Distribution DY1Q3	\$	-				

			3.a.i Score	sheet						
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 Organizational	Complete	5.00	5.00	100%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	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 5	Domain 3 Pay for Performance N/A		N/A	N/A	N/A	0%	0%	-	-	
	Domain 3 Subtotal				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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Print				Wes	stchester Medical Center -	Project 3.a
Module 3 - Patient Engager	nent 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	3				
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
		Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A		
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A		
3.a.i Model 1									



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

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		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	On Hold	Pass & Ongoing	N/A
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
3.a.i Model 3		12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		13. Measure outcomes as required in the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		14. Provide "stepped care" as required by the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		Total					0



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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
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5



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Total		10
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 3.a.ii

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

Payment Snapshot					
Payment Available (DY1)	\$	3,639,038.59			
DY1 Initial Payment	\$	2,183,423.15			
DY1 Q2 Payment Earned	\$	727,807.72			
DY1 Payment Not Earned to Date	\$	0.00			
DY1 Funding Remaining	\$	727,807.72			
Funding Available for Distribution DY1Q3	\$	-			

		3.a.ii Score	sheet																
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 Organizational	Complete	5.00	5.00	100%	80%	80% 0%												
Domain 1	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 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-										
	Domain 2 Subtotal			10.00	100%	20%	0%	-	-										
Total Complete		16.00	16.00	100%	100%	0%	-	-											

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

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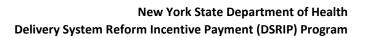
Domain 1 Project Milestones - Project 3.a.ii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A	



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Print			Wes	tchester Medical Center - I	Project 3.a.ii
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.	3/31/2019	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.	3/31/2019	3/31/2019	In Process	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.		3/31/2019	In Process	Pass & Ongoing	NA
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA





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5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2019	3/31/2019	In Process	Pass & Ongoing	NA
7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2019	3/31/2019	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 share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	NA
9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	NA
10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA



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11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
Total					0.00

	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							
	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							



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Time		
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
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



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Print	tchester Medical Center - F	Project 3.a.ii
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 3.c.i

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

Payment Snapshot				
Payment Available (DY1)	\$	2,950,571.83		
DY1 Initial Payment	\$	1,770,343.10		
DY1 Q2 Payment Earned		590114.3662		
DY1 Payment Not Earned to Date	\$	0.00		
DY1 Funding Remaining	\$	590,114.37		
Funding Available for Distribution DY1Q3	\$	-		

	3.c.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 Organizational	Complete	5.00	5.00	100%	80%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		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	6.00	6.00	100%	20%	0%	-	-		
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%	0%	-	-		
	Total	Complete	12.00	12.00	100%	100%	0%	-	-		

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

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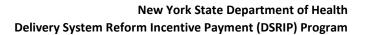
Domain 1 Project Milestones - Project 3.c.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A



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

	Domain 1 Project Prescribed Milestones - Project 3.c.i					
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	3/31/2017	Pass & Ongoing	N/A	
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	3/31/2017	Pass & Ongoing	N/A	
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to	3/31/2017	3/31/2017	Pass & Ongoing	N/A	
	improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	3/31/2017	1 ass & Ongoing	IN/A	
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	3/31/2017	Pass & Ongoing	N/A	





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5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	3/31/2017	Pass & Ongoing	N/A
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	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 providers.	3/31/2018	3/31/2018	Pass & Ongoing	N/A
Total				0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.c.i (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1				
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1				
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1				



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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 # 1 (DM Short term complication) ±	Pass & Ongoing	1
Total		6.00



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 3.d.iii

	Project Snapshot				
Project Domain Clinical Improvement Projects (Domain 3)					
Project ID	3.d.iii				
Project Title	Implementation of evidence-based medicine guidelines for asthma management				

Payment Snapshot				
Payment Available (DY1)	\$	3,048,924.23		
DY1 Initial Payment	\$	1,829,354.54		
DY1 Q2 Payment Earned	\$	609,784.85		
DY1 Payment Not Earned to Date	\$	0.00		
DY1 Funding Remaining	\$	609,784.85		
Funding Available for Distribution DY1Q3	\$	-		

			3.d.iii Score	esheet														
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 Organizational	Complete	5.00	5.00	100%	80%												
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		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 5	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.iii AVs Awarded: 10 out of 10

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Domain 1 Project Milestones - Project 3.d.iii								
AV Driving	Project Requirement and Metric/Deliverable		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.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
	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Deliver educational activities addressing asthma management to Description of the primary case providers.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	participating primary care providers.					



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4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A
5. Use EHRs or other technical platforms to track all patients engaged in	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
this project. 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	Reviewer Status	AVs Awarded					
	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					

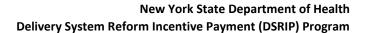


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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 3.d.iii

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Total 4.00



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 4.b.i

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

Payment Snapshot							
Payment Available (DY1)	\$	2,262,105.07					
DY1 Initial Payment	\$	1,357,263.04					
DY1 Q2 Payment Earned	\$	452,421.01					
DY1 Payment Not Earned to Date	\$	(0.00)					
DY1 Funding Remaining	\$	452,421.01					
Funding Available for Distribution DY1Q3	\$	-					

			4.b.i Score	sheet							
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 Organizational	Complete	5.00	5.00	100%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	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	9.00	9.00	100%	20%	0%	-	-		
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 4 Subtotal		9.00	9.00	100%	20%	0%	-	-		
	Total	Complete	14.00	14.00	100%	100%	0%	-	-		

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

Hide Reviewer Comments

	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				



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Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Percentage of cigarette smoking among adults	Pass & Ongoing	1
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Age-adjusted percentage of 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

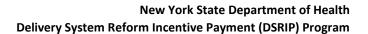


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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 4.b.i

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Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total		9.00





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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 4.b.ii

Project Snapshot				
Project Domain	Domain 4: Population-wide Projects: New York's			
Project ID	4.b.ii			
Project Title	Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings			

Payment Snapshot					
Payment Available (DY1)	\$	1,671,990.70			
DY1 Initial Payment	\$	1,003,194.42			
DY1 Q2 Payment Earned	\$	334,398.14			
DY1 Payment Not Earned to Date	\$	(0.00)			
DY1 Funding Remaining	\$	334,398.14			
Funding Available for Distribution DY1Q3	\$	-			

	4.b.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 Organizational	Complete	5.00	5.00	100%	80%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		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	16.00	16.00	100%	20%	0%	-	-		
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-		
Domain 4 Subtotal			16.00	16.00	100%	20%	0%	-	-		
Total Complete		21.00	21.00	100%	100%	0%	-	-			

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

Hide Reviewer Comments

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		



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Asthma emergency department visit rate per 10,000	Pass & Ongoing	1
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



Pass & Ongoing

1

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White non-Hispanics

Time		
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
Rate of hospitalizations for short-term complications of diabetes per 10,000 – 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
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	Pass & Ongoing	1



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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015 Westchester Medical Center - Project 4.b.ii

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Total 16.00