

### Achievement Value (AV) Scorecard The New York and Presbyterian Hospital

	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
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Line (Glick on the purple fline below to access each look whose purple fline below to access the
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



**Print Summary** 

Print All

Achievement Value (AV) Scorecard
The New York and Presbyterian Hospital

	PPS Information				
Quarter	DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)				
PPS	The New York and Presbyterian Hospital				
PPS Number	39				

	Achiev	ement Value (	AV) Scorecard	Summary						
		AV I	Data			Payment 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	4.00	0.00	4.00	Organizati	-	e embedded w payment	ithin each		
2.a.i	19.00	18.00	0.00	18.00	\$ -	\$ -	\$ -	\$ -		
2.b.i	20.00	19.00	0.00	19.00	\$ -	\$ -	\$ -	\$ -		
2.b.iii	20.00	19.00	0.00	19.00	\$ -	\$ -	\$ -	\$ -		
2.b.iv	20.00	19.00	0.00	19.00	\$ -	\$ -	\$ -	\$ -		
3.a.i	15.00	14.00	0.00	14.00	\$ -	\$ -	\$ -	\$ -		
3.a.ii	16.00	15.00	0.00	15.00	\$ -	\$ -	\$ -	\$ -		
3.e.i	13.00	12.00	0.00	12.00	\$ -	\$ -	\$ -	\$ -		
3.g.i	7.00	6.00	0.00	6.00	\$ -	\$ -	\$ -	\$ -		
4.b.i	14.00	13.00	0.00	13.00	\$ -	\$ -	\$ -	\$ -		



Print Summary Print All	Achievement Value (AV) Scoreca The New York and Presbyterian Hospit										
4.c.i	16.00	15.00	0.00	15.00	\$	-   5	<b>;</b> -	\$	-	\$	-
AV Adjustments (Column F)											
Total	160.00	150.00	0.00	150.00	\$	- !	\$	- \$	-	\$	-



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment The New York and Presbyterian Hospital - 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	0.00	0.00	0.00	0%					
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	4.00	0.00	4.00	80%					

Net Organizational AVs Awarded: 4 out of 5

### **Hide Reviewer Comments**

	Workforce Strategy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarde		
		Workforce Strategy Budget Updates	9/30/2016	3/31/2016	In Process	Pass & Ongoing			
Workforce Strategy		Workforce Impact Analysis and Updates	9/30/2016	6/30/2016	In Process	Pass & Ongoing			
Budget Updates									



# Save & Return Print

Budget Updates (non AV- driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.		New Hire Employment Analysis and Updates	9/30/2016	6/30/2016	In Process	Pass & Ongoing
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  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  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeal, will not be considered in subsequent periods.						
Additional 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  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.			3/31/2016	3/31/2016	Completed	Pass & Complete
for achieving defined target workforce  3/31/2020 3/31/2020 In Process Pass & Ongoing  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  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.						
Additional Workforce Strategy Budget Updates (non AVdriving)  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  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.		•	3/31/2020	3/31/2020	In Process	Pass & Ongoing
Additional Workforce Strategy Budget Updates (non AV-driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.						
Strategy Budget Updates (non AV-driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.		current state assessment of workforce	9/30/2016	9/30/2016	In Process	Pass & Ongoing
Updates (non AV-driving)  4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements  The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.	Strategy Budget Updates (non AV-					
The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals will not be considered in subsequent periods.		analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and		6/30/2016	Completed	Fail
5. Develop topining stretches.		The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit documentation that the Compensation & Benefits Analysis was approved by the Board. Failure to meet this milestone in DY2 Q1 will impact your payment in DY2 Q2. If you wish to appeal, you must do so within 5 business days. DY2 Q1 appeals				
5. Develop training strategy 9/30/2016 9/30/2016 In Process Pass & Ongoing		5. Develop training strategy	9/30/2016	9/30/2016	In Process	Pass & Ongoing



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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		
itional rkforce							
itegy ic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A	
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
		Total				0	

	Section 01 - Budget							
Process	AV	Milostono	Required Due	Committed Due	Milestone	Poviower Status	AV Awarded	
Measure	Driving	Milestone	Date	Date	Status	Reviewer Status	AV AWarueu	

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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment The New York and Presbyterian Hospital - Domain 1 Organizational AVs

	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete
	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing
uarterly Project					
Reports, Project	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete
dget 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

	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	6/30/2015	Completed	Pass & Complete			

Total



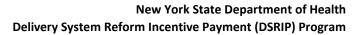
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		1					i
Governance Structure		Establish a clinical governance     structure, including clinical quality     committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	
Updates							1
		3. Finalize bylaws and policies or Committee 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	Completed	Pass & Complete	
Update							
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	3/31/2016	Completed	Pass & Complete	
		6. Finalize partnership agreements or contracts with CBOs	3/31/2017	3/31/2017	In Process	Pass & Ongoing	
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	3/31/2016	3/31/2016	Completed	Pass & Complete	N/
uriviligj							
		8. Finalize workforce communication and engagement plan	12/31/2015	12/31/2015	Completed	Pass & Complete	



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		9. Inclusion of CBOs in PPS Implementation	3/31/2020	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 - 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			





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Section 03 - Financial Sustainability								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status		
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete		
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	Completed	Pass & Complete		
pdate								
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Completed	Pass & Complete		
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
dditional inancial								



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

		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	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	Completed	Pass & Complete	1
		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	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	
		Total				1

	Section 05 - IT Systems and Processes										
Process	AV	Milestone	Required Due	e Committed Due	Milestone Status	Reviewer Status	AV Awarded				
Measure	Driving	Willestone	Date	Date							
		1. Perform current state assessment of IT									
		capabilities across network, identifying									
		any critical gaps, including readiness for	N/A	3/31/2016	Completed	Pass & Complete					
		data sharing and the implementation of									
		interoperable IT platform(s).									



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-	Develop an IT Change Management     Strategy.	N/A	9/30/2016	In Process	Pass & Ongoing
T Systems – and Processes	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	9/30/2016	In Process	Pass & Ongoing
	4. 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	3/31/2020	On Hold	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
dditional – Γ Systems	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
and Processes					
onic Areas L					



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TOPIC ATEAS		Key Stakeholder	5	N/A	N/A	In Process	Pass & Ongoing
		Progress Reporti	ng	N/A	N/A	In Process	Pass & Ongoing
				Total			

	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	3/31/2016	Completed	Pass & Complete	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	Completed	Pass (with Exception) & Complete				
		The PPS submitted documentation as part provided the feedback accepting this remitthe completion of this milestone prior to to the IA informed the PPS on September 14 based upon the supporting documentation will address the IA issues as detailed below	ediation response heir remediation , 2016, "We cann n it provides. Plea	via email". The submission. The ot preemptively se submit whate	PPS appears to a IA reminds the I approve milesto ever documenta	believe that the IA approved PPS that this is not the case. ones. We must review each PPS tion and narrative you believe	N/A			
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing				



	Print			The New Y	ork and Presbyt	erian Hospital - Domain 1 Orga	nizational AVs
		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							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				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.	3/31/2016	3/31/2016	Completed	Pass & Complete				



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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.	6/30/2016	6/30/2016	Completed	Pass & Complete	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 Practitioner							N/A
Engagement 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	



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment The New York and Presbyterian Hospital - Domain 1 Organizational AVs

		Section	08 - Population I	Health Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop population health management roadmap.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
Population							NA
Health		2. Finalize PPS-wide bed reduction plan.	N/A	6/30/2017	On Hold	Pass & Ongoing	N/A
							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
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	

Total



Save	& Return

Pr	nt		The New Y	ork and Presby	terian Hospitai - Domain 1 Orgi
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
		'		,	
		Total			

			Section 09 - Clinic	al 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'.	9/30/2016	9/30/2016	On Hold	Pass & Ongoing	N/A
Clinical							IN/A
Integration		2. Develop a Clinical Integration strategy.	6/30/2017	6/30/2017	On Hold	Pass & Ongoing	N/A
							NA
		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							NI/A



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Integration	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
Topic Areas		·	·			
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0



Save & Return

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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital AV Adjustments

AV Adjustment Scoresheet												
	AVs Dor	AVs Per Total To		Total AVs Awarded		Adjusted	Net AVs Awarded					
Adjustment	Project			Net	Percentage	Aujusteu AVs	Net	Percentage AV				
	Project	Selected	Available	Awarded	AV	AVS	Awarded	reiteillage AV				
Organizational Adjustments (applied to all projects)	5.00	10.00	50.00	40.00	80%	0.00	40.00	80%				
Project Adjustments (applied to one project only)	Various	10.00	110.00	110.00	100%	0.00	110.00	100%				
Total				150.00	94%	0.00	150.00	94%				

Hic	Hide Reviewer Comments								
	No AV Adjustments								
	Please note that there are no AV adjustments for The New York and Presbyterian Hospital in DY2, Q1								



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - 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 (DY2)	\$ 1,331,155.18
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 1,249,016.35

	2.a.i Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	4.00	80%	60%	60%	60%				
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	4.00	80%	60%	0%	-	-			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-			
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-			
	Domain 2 Subtotal			14.00	100%	40%	0%	-	-			
	Total Complete			18.00	95%	100%	0%	-	-			

Total Project 2.a.i AVs Awarded: 18 out of 19

#### Hide Reviewer Comments

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



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

		. ,	ŤΙ	ne New York (	and Presbyterian Hospital	- Project 2.a.i
	Print				, ,	•
Total						0.00
	Domain 1 Project Prescribed	Milestones - F	Project 2.a.i			
AV Driving	Project Requirement and Metric/Deliverable	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.	3/31/2018	3/31/2016	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
		2				
•	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



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. 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.	9/30/2018	9/30/2018	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.	9/30/2018	9/30/2018	In Process	Pass & Ongoing	N/A
	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  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.  8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  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.  8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.  3/31/2018	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  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.  8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  9/30/2018 9/30/2018  9/30/2018 9/30/2018  10. Re-enforce the transition towards value-based payment reform by	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  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.  8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  9/30/2018   9/30/2018   In Process  10. Re-enforce the transition towards value-based payment reform by	meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.  6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.  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.  8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  9/30/2018 9/30/2018 In Process Pass & Ongoing  Pass & Ongoing



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

11. Engage patients in the integrated delivery system through outreach					
and navigation activities, leveraging community health workers, peers,	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
and culturally competent community-based organizations, as appropriate.					

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	0.33333333				
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333				
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333				
	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				



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

Print Print	and Presbyterian Hospital -	Project 2.a.i
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



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

Print Print	ina Fresbyterian Hospital -	r roject z
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	N/A
	2 22 :	
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



Save & Return

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

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Total 14.00



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

Project Snapshot						
<b>Project Domain</b>	Project Domain System Transformation Projects (Domain 2)					
Project ID	2.b.i					
Project Title	Ambulatory ICUs					

Payment Snapshot	
Payment Available (DY2)	\$ 933,714.60
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 876,099.82

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)													
	Domain 1 Organizational	Complete	5.00	4.00	80%	60%																
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		60% 0%	-	-													
	Patient Engagement Speed	Complete	1.00	1.00	100%																	
	Domain 1 Subtotal		6.00	5.00	83%	60%	0%	-	-													
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-													
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-													
	Domain 2 Subtotal			14.00	100%	40%	0%	-	-													
	Total	Complete	20.00	19.00	95%	100%	0%	-	-													

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

#### Hide Reviewer Comments

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

Pass (with Exception) &

1



Module 3 - Patient Engagement Speed

Save & Return

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.

Ongoing

Total 1.00

In Process

N/A

	Domain 1 Project Prescribed	Milestones - I	Project 2.b.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
•	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

#### Print 4. Establish care managers co-located at each Ambulatory ICU site. 3/31/2017 3/31/2017 In Process Pass & Ongoing N/A 5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and 3/31/2018 3/31/2018 Pass & Ongoing N/A In Process sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up. 6. Ensure that EHR systems used by participating providers meet 3/31/2018 3/31/2018 Pass & Ongoing In Process N/A Meaningful Use and PCMH Level 3 standards and/or APCM. 7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-3/31/2018 3/31/2018 In Process Pass & Ongoing N/A management. 8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the 3/31/2017 3/31/2017 In Process Pass & Ongoing N/A input of multiple providers. 9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care 3/31/2018 3/31/2018 Pass & Ongoing N/A In Process and utilization. 10. Use EHRs and other technical platforms to track all patients engaged 3/31/2017 3/31/2017 In Process Pass & Ongoing N/A in the project.



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

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Total 0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.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	0.33333333				
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333				
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333				
	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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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

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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



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

Print		
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	N/A
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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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

Print

Primary Care - Usual Source of Care - Q2

Pass & Ongoing

0.5

Total

14.00



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iii

	Project Snapshot							
Project Domain System Transformation Projects								
Project ID	2.b.iii							
Project Title	ED care triage for at-risk populations							

Payment Snapshot					
Payment Available (DY2)	\$	1,027,876.99			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	964,451.92			

2.b.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	4.00	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal		6.00	5.00	83%	60%	0%	-	-	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal		14.00	14.00	100%	40%	0%	-	-	
Total Complete			20.00	19.00	95%	100%	0%	-	-

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

#### **Hide Reviewer Comments**

Domain 1 Project Milestones - Project 2.b.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		



Save & Return  Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Qu The New York and Presbyterian Hospital - Project						-
Print			THE	New York an	u Presbyteriuri Hospitui - P	roject z.b.iii
		-				
Module 3 - Patient Engagen	nent Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.						
	Total					1.00

	Domain 1 Project Prescribed N	/lilestones - P	roject 2.b.iii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
•	<ol> <li>Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling.</li> <li>Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.</li> <li>Develop process and procedures to establish connectivity between the emergency department and community primary care providers.</li> </ol>	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



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3. For patients presenting with minor illnesses who do not have a primary care provider:  a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.  b. Patient navigator will assist the patient with identifying and accessing needed community support resources.  c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A	
appropriate level of care. (This requirement is optional.)						
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	
Total						

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.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	0.33333333						





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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
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



Print		-
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	N/A
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		14.00



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - 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 (DY2)	\$	953,748.24			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	894,897.28			

	2.b.iv Scoresheet																							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)															
	Domain 1 Organizational	Complete	5.00	4.00	80%																			
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-															
	Patient Engagement Speed	Complete	1.00	1.00	100%																			
	Domain 1 Subtotal		6.00	5.00	83%	60%	0%	-	-															
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	0%	-	-															
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-															
Domain 2 Subtotal			14.00	14.00	100%	40%	0%	-	-															
	Total	Complete	20.00	19.00	95%	100%	0%	-	-															

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

#### **Hide Reviewer Comments**

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



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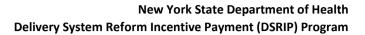
Print		The	New York an	d Presbyterian Hospital - P	Project 2.b.iv
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly repo quarterly review. The DY2 Q1 Actively Engaged data will be subject to r		•		•	-
Total					1.00

	Domain 1 Project Prescribed Milestones - 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.	3/31/2017	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
	Ensure required social services participate in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	



	Print		The	New York an	d Presbyterian Hospital - P	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							

	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	0.33333333						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333						





Print

Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5



H-CAHPS – Care Transition Metrics	Pass & Ongoing	
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	
PDI 90– Composite of all measures +/-	Pass & Ongoing	
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	N
	Medicaid Spending on ER and Inpatient Services ±  Medicaid spending on Primary Care and community based behavioral health care  PDI 90- Composite of all measures +/-  Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange  Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards  Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Medicaid Spending on ER and Inpatient Services ±  Pass & Ongoing  Medicaid spending on Primary Care and community based behavioral health care  Pass & Ongoing  PDI 90- Composite of all measures +/-  Pass & Ongoing  Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange  Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards  Pass & Ongoing  Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS  Pass & Ongoing



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

#### Save & Return

Print		
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		14.00



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - 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 (DY2)	\$ 832,716.90
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 781,334.17

		sheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	4.00	80%								
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-				
	Patient Engagement Speed	Complete	0.00	0.00	0%								
	Domain 1 Subtotal		5.00	4.00	80%	60%	0%	-	-				
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	16%	0%	-	-				
Domain 5	Domain 3 Pay for Performance N/A		N/A	N/A	N/A	24%	0%	-	-				
	Domain 3 Subtotal			10.00	100%	40%	0%	-	-				
Total Complete			15.00	14.00	93%	100%	0%	-	-				

**Hide Reviewer Comments** 

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

	Domain 1 Project Milestones - Project 3.a.i									
AV Drivii	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				



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

Save & Return	Achievement Value	e (AV) Scorecc		=	lune 30, 2016 (Non-Payme	-
Print			Th	e New York a	nd Presbyterian Hospital -	Project 3.a.i
Module 3 - Patient Engagement Speed		Ongoing	N/A	Not Started	Pass & Ongoing	N/A
	Total					0

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3									
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3									
Model	Model AV Project Requirement and Metric/Deliver			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.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A			
		2. 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 1										



	Print			Th	e New York a	nd Presbyterian Hospital -	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.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		4. 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
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		process.					
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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
			-				
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A

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

#### Save & Return

	Print			The	e New York a	nd Presbyterian Hospital -	Project 3
	•	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		44. Further haired Danneric Con Management in					
		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



Print

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
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.i

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



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.ii

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

Payment Snapshot	
Payment Available (DY2)	\$ 826,489.63
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 775,491.16

			3.a.ii Score	sheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)								
	Domain 1 Organizational	Complete	5.00	4.00	80%	60%											
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	5.00	83%	60%	0%	-	-								
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	16%	0%	-	-								
Domain 5	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	24%	0%	-	-								
Domain 2 Subtotal			10.00	10.00	100%	40%	0%	-	-								
	Total	Complete	16.00	15.00	94%	100%	0%	-	-								

Total Project 3.a.ii AVs Awarded: 15 out of 16

#### Hide Reviewer Comments

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		



Print		The	e New York aı	nd Presbyterian Hospital - I	Project 3.a.ii
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly report quarterly review. The DY2 Q1 Actively Engaged data will be subject to re		•		•	-
Total					1.00

	Domain 1 Project Prescribed I	Milestones - F	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.	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	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

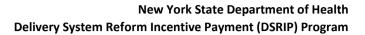


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•	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2017	3/31/2017	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.	3/31/2017	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.	3/31/2017	3/31/2017	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



Print		ine	e new York an	na Presbyterian Hospitai - F	roject 3.a.ii
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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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



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

Save & Return	Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payme						
Print	The New York as	nd Presbyterian Hospital - F	Project 3.a.ii				
Screening for Clinical Depression and follow-up		Pass & Ongoing	1				
Total 10.0							



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

	Project Snapshot							
Project Domain Clinical Improvement Projects (Domain 3)								
Project ID 3.e.i								
Project Title	Comprehensive project to decrease HIV/AIDS transmission—development of Center of Excellence management of HIV/AIDS							

Payment Snapshot						
Payment Available (DY2)	\$	726,222.47				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	670,054.12				

		3.e.i Scoresheet							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	4.00	80%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	0%	-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	5.00	83%	60%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	16%	0%	-	-
Domain 5	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	24%	0%	-	-
	Domain 3 Subtotal			7.00	100%	40%	0%	-	-
Total Complete			13.00	12.00	92%	100%	0%	-	-

**Hide Reviewer Comments** 

Total Project 3.e.i AVs Awarded: 12 out of 13

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



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
The New York and Presbyterian Hospital - Project 3.e.i

Module 3 - Patient Engagement Speed

Module 3 - Patient Engagement Speed

The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.

Total

#### Domain 1 Project Prescribed Milestones - Project 3.e.i Models 1, 2 and 3 ✓ 3.e.i Model 1 ✓ 3.e.i Model 2 Required AVCommitted Milestone Model Project Requirement and Metric/Deliverable **Reviewer Status AVs Awarded** Driving **Due Date Due Date** Status 1. Develop a consulting/referral/educational relation with a center of excellence for management of HIV/AIDS that ensures early access to and retention in HIV and HCV Care – Scatter Pass & Ongoing 3/31/2020 3/31/2020 On Hold N/A Model; ensure medical and behavioral health consultation expertise are available. 2. Identify primary care providers who have significant case 3/31/2020 Pass & Ongoing 3/31/2020 On Hold N/A loads of patients infected with HIV. 3. Implement training for primary care providers which will Pass & Ongoing 3/31/2020 3/31/2020 On Hold N/A include consultation resources from the center of excellence.



	Print				c wew fork u	na i resbyterian riospitar-	Troject S.c.
3.e.i Model 1		4. Develop coordination of care services with behavioral health and social services within or linking with the primary care providers' offices.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	•	5. Ensure systems are in place that address patient partnerships to care, ensure follow-up and retention in care, and promote adherence to medication management, monitoring and other requirements of evidence-based practice for management of HIV/AIDS.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		6. Institute a system to monitor quality of care with educational services where gaps are identified.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		7. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		8. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

#### Print 9. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, 9/30/2017 9/30/2017 In Process Pass & Ongoing N/A behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment. 10. Co-locate care management services including Health 9/30/2017 9/30/2017 In Process Pass & Ongoing N/A Home care managers for those eligible for Health Homes. 11. Develop a referral process and connectivity for referrals of 3/31/2017 Pass & Ongoing 3/31/2017 N/A In Process people who qualify for but are not yet in a Health Home. 12. Ensure understanding and compliance with evidence-3/31/2017 3/31/2017 Pass & Ongoing In Process N/A based guidelines for management of HIV/AIDS (and HCV) 13. Ensure coordination of care between all available services 3.e.i Model 2 preferably through a single electronic health/medical/care Pass & Ongoing 9/30/2017 9/30/2017 In Process N/A management record. 14. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health 9/30/2017 Pass & Ongoing 9/30/2017 In Process N/A information among clinical partners, including direct exchange (secure messaging), alerts and patient record look ups, by the end of DY 3.



Р	rint			Th	e New York a	nd Presbyterian Hospital -	Project 3.e.i
	•	15. Ensure that EHR systems or other IT platforms, used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
		16. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		17. Seek designation as center of excellence from New York State Department of Health.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
		Total					0

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.e.i (all Milestones are P4R in DY1)									
AV Driving	Measure	Reviewer Status	AVs Awarded							
	Cervical Cancer Screening	Pass & Ongoing	1							
	Chlamydia Screening (16 – 24 Years)	Pass & Ongoing	1							
	HIV/AIDS Comprehensive Care : Engaged in Care	Pass & Ongoing	1							



Print The New York of	ınd Presbyterian Hospital	- Project 3.e.i
HIV/AIDS Comprehensive Care : Syphilis Screening	Pass & Ongoing	1
HIV/AIDS Comprehensive Care: Viral Load Monitoring	Pass & Ongoing	1
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.33333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.33333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.33333333
Viral Load Suppression	Pass & Ongoing	1
Total		7



Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 3.g.i

Project Snapshot							
Project Domain   Clinical Improvement Projects (Domain 3)							
Project ID	3.g.i						
Project Title	Integration of palliative care into the PCMH model						

Payment Snapshot						
Payment Available (DY2)	\$	513,574.45				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	473,852.98				

	3.g.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	4.00	80%	60%	% 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	5.00	83%	60%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	1.00	1.00	100%	16%	0%	-	-
Domain 5	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	24%	0%	-	-
	Domain 2 Subtotal			1.00	100%	40%	0%	-	-
Total Complete			7.00	6.00	86%	100%	0%	-	-

Total Project 3.g.i AVs Awarded: 6 out of 7

#### **Hide Reviewer Comments**

Domain 1 Project Milestones - Project 3.g.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		Th	e New York a	nd Presbyterian Hospital -	Project 3.g.i		
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1		
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation as part of this quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported in DY2 Q2.							
Total					1.00		

	Domain 1 Project Prescribed Milestones - Project 3.g.i					
AV Driving	iving Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Proxy Palliative Care Measure	Pass & Ongoing	1				
	Total						



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

	Project Snapshot
<b>Project Domain</b>	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 (DY2)	\$ 590,094.35
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 553,682.63

4.b.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	4.00	80%		0% -		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%		-	-
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	4.00	80%	60%	0%	-	-
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	40%	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%	40%	0%	-	-
	Total	Complete	14.00	13.00	93%	100%	0%	-	-

Total Project 4.b.i AVs Awarded: 13 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	-
,			
	Percentage of cigarette smoking among adults	Pass & Ongoing	
,			
	Percentage of premature death (before age 65 years)	Pass & Ongoing	
,			
	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	
,			
	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	:
,			
	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	-
,			
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	



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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 DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

The New York and Presbyterian Hospital - Project 4.c.i

Project Snapshot				
<b>Project Domain</b>	Domain 4: Population-wide Projects: New York's			
Project ID	4.c.i			
Project Title	Decrease HIV morbidity			

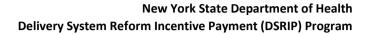
Payment Snapshot				
Payment Available (DY2)	\$	492,793.82		
Funding Available for Distribution DY2Q1		-		
Dollars Earned to Date (DY1)	\$	462,386.01		

	4.c.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q1)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	4.00	80%	60%	0%	-	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				-
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			5.00	4.00	80%	60%	0%	-	-
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	40%	0%	-	-
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	40%	0%	-	-
Total Complete			16.00	15.00	94%	100%	0%	-	-

Total Project 4.c.i AVs Awarded: 15 out of 16

#### Hide Reviewer Comments

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.i (all Milestones are P4R in DY1)				
A۱	/ Driving	Measure	Reviewer Status	AVs Awarded	
		Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1	





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	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
		·	
	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
_	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1



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Age-adjusted percentage of adults who have a regular health care provider -	Aged 18+ years Pass & On	igoing 1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & On	igoing 1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – White non-Hispanics	Ratio of Black non-Hispanics to Pass & On	igoing 1
Total		11.00