

Achievement Value (AV) Scorecard Staten Island Performing Provider System, LLC

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 Link (rific on the purple finis below to access each biolividinals project report) Domain I- Organizational (All Projecto) AV Adjustments (column) 2 a 1 2 a 10 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



Print Summary

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Achievement Value (AV) Scorecard Staten Island Performing Provider System, LLC

	PPS Information					
Quarter	DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)					
PPS	Staten Island Performing Provider System, LLC					
PPS Number	43					

	Achievement 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.iii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.b.iv	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.b.vii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.b.viii	20.00	20.00	0.00	20.00	\$ -	\$ -	\$ -	\$ -				
2.d.i	8.00	8.00	0.00	8.00	\$ -	\$ -	\$ -	\$ -				
3.a.i	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -				
3.a.iv	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -				
3.c.i	12.00	12.00	0.00	12.00	\$ -	\$ -	\$ -	\$ -				
3.g.ii	7.00	7.00	0.00	7.00	\$ -	\$ -	\$ -	\$ -				



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Achievement Value (AV) Scorecard
Staten Island Performing Provider System, LLC

4.a.iii	16.00	16.00	0.00	16.00	\$ -	\$ -	\$ -	\$ -
4.b.ii	21.00	21.00	0.00	21.00	\$ -	\$ -	\$ -	\$ -
AV Adjustments (Column F)								
Total	176.00	176.00	0.00	176.00	\$ -	\$ -	\$ -	\$ -



Save & Return

Print

Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



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		Define target workforce state (in line with DSRIP program's goals)	12/31/2015	12/31/2015	Completed	Pass & Complete			
	•	2. Create a workforce transition roadmap for achieving defined target workforce	3/31/2016	3/31/2016	Completed	Pass & Complete			
dditional orkforce	•	3. Perform detailed gap analysis between current state assessment of workforce	3/31/2016	3/31/2016	Completed	Pass & Complete			
rategy		and projected future state							
dget									
odates on AV-		4. Produce a compensation and benefit analysis, covering impacts on both							
riving)		retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	6/30/2016	Completed	Pass & Complete			
		partial placements							
		5. Develop training strategy	3/31/2016	3/31/2016	Completed	Pass & Complete			
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing			



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

	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, Project	•	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1		
Budget and Flow of									
Funds		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing			
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing			
	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				
		2. Establish a clinical governance								
Governance		structure, including clinical quality	12/31/2015	12/31/2015	Completed	Pass & Complete				
Structure		committees for each DSRIP project								



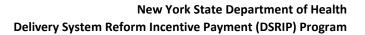
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Updates						
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete
Update						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	12/31/2015	12/31/2015	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	N/A	3/31/2016	Completed	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 mental hygiene, Social Services, Corrections, etc.)	N/A	3/31/2016	Completed	Pass & Complete
		8. Finalize workforce communication and engagement plan	N/A	6/30/2016	Completed	Pass & Complete



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		9. Inclusion of CBOs in PPS Implementation	N/A	3/31/2020	In Process	Pass & Ongoing
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
Additional						
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
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 - Financi	al Sustainability		
Process AV Measure Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status
	Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete
inancial itability	 Perform network financial health current state assessment and develop financial sustainability strategy to addrest key issues. 	3/31/2016	3/31/2016	Completed	Pass & Complete
Update					
	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 nancial					



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Stability 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				1

	Section 04 - Cultural Competency & Health Literacy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
Cultural Competency /Health Literacy		Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete			
		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 Cultural Competency		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
/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 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).	9/30/2015	9/30/2015	Completed	Pass & Complete				



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	2. Develop an IT Change Management Strategy.	3/31/2016	3/31/2016	Completed	Pass & Complete
T Systems ——					
and Processes	 Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 	12/31/2015	12/31/2015	Completed	Pass & Complete
	4. Develop a specific plan for engaging attributed members in Qualifying Entitie	12/31/2015	12/31/2015	Completed	Pass & Complete
	5. Develop a data security and confidentiality plan.	N/A	12/31/2015	Completed	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
and Processes					



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TOPIC ATEAS		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing		
	•	Progress Reporting	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.	12/31/2015	12/31/2015	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.	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			



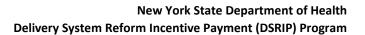
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Additional Performanc e Reporting Topic Areas		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
							N/A	
	•	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
	Total							

	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.	12/31/2015	12/31/2015	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.	3/31/2016	3/31/2016	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 Staten Island Performing Provider System, LLC - 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
		Develop population health management roadmap.	3/31/2016	3/31/2016	Completed	Pass & Complete	N/A
Population							IV/A
Health		2. Finalize PPS-wide bed reduction plan.	3/31/2016	3/31/2016	Completed	Pass & Complete	N/A
							IV/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	IV/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

Total



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	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
			ı		
		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'.	12/31/2015	12/31/2015	Completed	Pass & Complete	N/A
Clinical Integration							IN/A
	•	2. Develop a Clinical Integration strategy.	3/31/2016	3/31/2016	Completed	Pass & Complete	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 Clinical							NI/A



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

Staten Island Performing Provider System, LLC AV Adjusti

AV Adjustment Scoresheet								
	AVs Per	Ava Barr Total		Total AV	Awarded	Adjusted	Net A	Vs Awarded
Adjustment	Project	Projects	ects Total AVs Available	Net	Percentage	Aujusteu AVs	Net	Dorsontoso AV
			Available	Awarded	AV	AVS	Awarded	Percentage AV
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	121.00	121.00	100%	0.00	121.00	100%
Total				176.00	100%	0.00	176.00	100%

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Staten Island Performing Provider System, LLC in DY2, Q1



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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)
Staten Island Performing Provider System, LLC - 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 (DY2)	\$ 4,172,377.65
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 3,849,672.73

	2.a.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	5.00	100%	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	6.00	100%	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	20.00	100%	100%	0%	-	-	

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

Hide Reviewer Comments

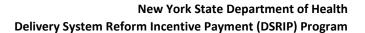
Domain 1 Project Milestones - Project 2.a.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	



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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 (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 rea		· ·		•	-
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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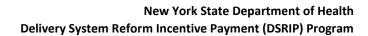
•	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
			I			
	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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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



Save & Return Achievement Value (AV) Scorecard DY2, Q1 April 1, 20 Staten Island Perfo	16 - June 30, 2016 (Non-Payme rming Provider System, LLC - F	-
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)

Staten Island Performing Provider System, LLC - 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.			

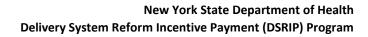
Payment Snapshot	
Payment Available (DY2)	\$ 3,971,674.73
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 3,726,602.86

		2.b.iv Score	esheet						
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	5.00	100%			6 -	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	50% 0%		-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	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	20.00	100%	100%	0%	-	-

Total Project 2.b.iv AVs Awarded: 20 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	



NEW YORK STATE of Health Medicaid Redesign Te	am
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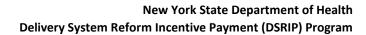
Print		Staten Isla	and Performii	ng Provider System, LLC - F	roject 2.b.iv	
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	1	
The Actively Engaged data submitted with your DY2 Q1 quarterly reports is under review by the IA, and was not subject to remediation 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 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.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
	Ensure required social services participate in the project.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
•						



Print		Staten Isla	and Performii	ng Provider System, LLC - P	Project 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.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
Total					0.00

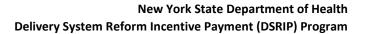
	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iv (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333				
	Adult Access to Preventive or Ambulatory Care - 45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



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

Staten Island Performing Provider System, LLC - Project 2.b.iv

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)

Staten Island Performing Provider System, LLC - Project 2.b.vii

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

Payment Snapshot						
Payment Available (DY2)	\$	3,695,581.22				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	3,467,545.67				

			2.b.vii Scor	esheet														
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	5.00	100%	60%	60%	60%										
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				0%	0%	-	-						
	Patient Engagement Speed	Complete	1.00	1.00	100%													
	Domain 1 Subtotal		6.00	6.00	100%	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		20.00	20.00	100%	100%	0%	-	-									

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

Hide Reviewer Comments

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



Print		Staten Isla	na Perjormin	g Provider System, LLC - Pi	roject 2.b.vii		
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 2.b.vii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	Identify a facility champion who will engage other staff and serve as	I				ı
	a coach and leader of INTERACT program.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Educate all staff on care pathways and INTERACT principles.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A

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	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						0.00



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AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25



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



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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)

Staten Island Performing Provider System, LLC - Project 2.b.viii

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

Payment Snapshot					
Payment Available (DY2)	\$	4,116,648.69			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	3,862,631.21			

		2.b.viii Scor	esheet											
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	5.00	100%	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	6.00	100%	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	20.00	100%	100%	0%	-	-					

Total Project 2.b.viii AVs Awarded: 20 out of 20

Hide Reviewer Comments

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



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



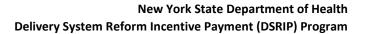
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 TTINC					
4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for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



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11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	•	•			
Total					

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





Print	- -	_
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1



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Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	N/A
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1



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PQI 90 – Composite of all measures +/-	Pass & Ongoing	1				
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5				
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5				
Total		14.00				



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

Staten Island Performing Provider System, LLC - 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 (DY2)	\$	3,530,776.05			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	3,312,909.79			

	2.d.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	5.00	100%	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	6.00	100%	60%	0%	-	-			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	40%	0%	-	-			
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-			
Domain 2 Subtotal			2.00	2.00	100%	40%	0%	-	-			
Total Complete			8.00	8.00	100%	100%	0%	-	-			

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

Hide Reviewer Comments

I	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	



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Print		Staten Is	land Perform	ing Provider System, LLC -	Project 2.a.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 popular quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported					
Total					1.00

	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
	and expertise in patient detration and engagement.						
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "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	2/24/2017	2/24/2017	In Dunana	Dass & Ongoing	N1/A
literacy, and cultural competency.	3/31/2017	3/31/2017	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	Not Started	Pass & Ongoing	N/A
betteriorates to may her designated in a face outcome measurements in				ı	
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	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
towards improvement, must be set for each cohort at the beginning of	3/31/2017	3/31/2017	Not Started	T uss & ongoing	I IVA
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
cur c.					
9. Measure PAM® components	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3,31,231,	3,31,231,			14,71
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A



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	11111					
•	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2017	3/31/2017	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	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A



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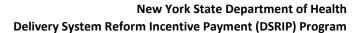
	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
Total						

	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	N/A
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	N/A
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	N/A
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	N/A
	ED use by uninsured	Pass & Ongoing	1



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PAM Level	Pass & Ongoing	N/A
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history	Pass & Ongoing	1
for primary care and preventive services in measurement year compared to same in baseline year	0 0	
Total		2.00





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

Staten Island Performing Provider System, LLC - Project 3.a.i

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

Payment Snapshot						
Payment Available (DY2)	\$	3,529,376.62				
Funding Available for Distribution DY2Q1		-				
Dollars Earned to Date (DY1)	\$	3,311,596.72				

			3.a.i 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	5.00	100%		60% 0%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%		-	-
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	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				16.00	100%	100%	0%	-	-

Hide Reviewer Comments

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		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-Paymer					•	
	Print			Staten Is	land Perform	ing Provider System, LLC -	Project 3.a.i
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			1				
				ı			
	Module 3 - Patient Engager	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 a quarterly review. The DY2 Q1 Actively Engaged data will be subject to remediation in DY2 Q2 along with the Actively Engaged data reported						
		Total					1

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



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		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		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
		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
3.a.i Model 2							
		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
					ı		
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A

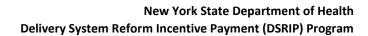
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	•	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
		11. Employ a trained Depression 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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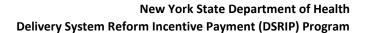
AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	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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Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10





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

Staten Island Performing Provider System, LLC - Project 3.a.iv

	Project Snapshot				
Project Domain Clinical Improvement Projects (Domain 3)					
Project ID	3.a.iv				
Project Title	Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal services) capabilities and appropriate enhanced abstinence services within community-based addiction treatment programs				

Payment Snapshot				
Payment Available (DY2)	\$	3,378,100.78		
Funding Available for Distribution DY2Q1		-		
Dollars Earned to Date (DY1)	\$	3,169,655.34		

	3.a.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	5.00	100%	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	6.00	100%	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	100%	40%	0%	-	-
	Total	Complete	16.00	16.00	100%	100%	0%	-	-

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

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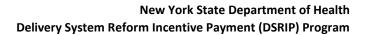
Domain 1 Project Milestones - Project 3.a.iv							
AV Dri ving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	



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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 (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 the 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 C2.					
Total					1.00

	Domain 1 Project Prescribed Milestones - Project 3.a.iv						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A	
	Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A	
	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A	





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•	4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	6. Develop care management services within the SUD treatment	2/24/2040	2/24/2040		Daniel Connection	21/2
	program.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	8. Use EHRs or other technical platforms to track all patients engaged in	C /20 /201 C	C /20 /201 C	Commission	Dage 9 Complete	21/2
	this project.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
	Total					0.00

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.iv (all Milestones are P4R in DY1)						
AV Dri ving	Measure	Reviewer Status	AVs Awarded			



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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



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Total		10.00
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
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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Staten Island Performing Provider System, LLC - 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 (DY2)	\$	2,788,706.03		
Funding Available for Distribution DY2Q1		-		
Dollars Earned to Date (DY1)	\$	2,616,629.15		

			3.c.i 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	5.00	100%	60% 0%	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%	60%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	16%	0%	-	-
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	24%	0%	-	-
	Domain 2 Subtotal		6.00	6.00	100%	40%	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 (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 rel		•		•	•
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.	3/31/2018	In Process	Pass & Ongoing	N/A	
	Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	In Process	Pass & Ongoing	N/A	
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to	3/31/2017	In Process	Pass & Ongoing	N/A	
	improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	1111100033	Tuss & Ongoing	IVA	
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	In Process	Pass & Ongoing	N/A	



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	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Not Started	Pass & Ongoing	N/A
	6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	In Process	Pass & Ongoing	N/A
	7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2018	In Process	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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Achievement Value (AV) Scorecard DY2, Q1 April 1, 2016 - June 30, 2016 (Non-Payment Quarter)

Staten Island Performing Provider System, LLC - Project 3.c.i

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

Staten Island Performing Provider System, LLC - Project 3.g.ii

Project Snapshot								
Project Domain Clinical Improvement Projects (Domain 3)								
Project ID	3.g.ii							
Project Title	Integration of Palliative Care into Nursing Homes							

Payment Snapshot	
Payment Available (DY2)	\$ 2,421,917.85
Funding Available for Distribution DY2Q1	-
Dollars Earned to Date (DY1)	\$ 2,272,473.60

			3.g.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	5.00	100%	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	6.00	100%	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	1.00	100%	40%	0%	-	-			
	Total	Complete	7.00	7.00	100%	100%	0%	-	-			

Total Project 3.g.ii AVs Awarded: 7 out of 7

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	Domain 1 Project Milestones - Project 3.g.ii							
A۱	/ 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 (with Exception) & Ongoing	1
The Actively Engaged data submitted with your DY2 Q1 quarterly requarterly review. The DY2 Q1 Actively Engaged data will be subject t		-			-
Total					1.00

	Domain 1 Project Prescribed	Milestones - I	Project 3.g.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	including Hospice, to bring the palliative care supports and services into the	12/31/2015	12/31/2015	Completed	Pass & Complete	N/A
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Use EHRs or other IT platforms to track all patients engaged in this	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A
project. Total					0.00

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.ii (all Milestones are P4R in DY1)							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Proxy Palliative Care Measure	Pass & Ongoing	1					
	Total		1.00					



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

Staten Island Performing Provider System, LLC - Project 4.a.iii

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

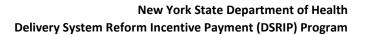
Payment Snapshot					
Payment Available (DY2)	\$	1,977,256.33			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	1,855,249.88			

	4.a.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	5.00	100%	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	5.00	100%	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	16.00	100%	100%	0%	-	-											

Total Project 4.a.iii AVs Awarded: 16 out of 16

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	Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY1)							
4	NV Driving	Measure	Reviewer Status	AVs Awarded				
ľ		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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Age-adjusted suicide death rate per 100,000	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
Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1



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

Staten Island Performing Provider System, LLC - Project 4.a.iii

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Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1

Total



Print

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

Staten Island Performing Provider System, LLC - Project 4.b.ii

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

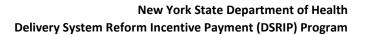
Payment Snapshot					
Payment Available (DY2)	\$	1,680,667.88			
Funding Available for Distribution DY2Q1		-			
Dollars Earned to Date (DY1)	\$	1,576,962.40			

	4.b.ii 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	5.00	100%	60% 0%														
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%	60%	0%	-	-											
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	16.00	16.00	100%	40%	0%	-	-											
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-											
	Domain 4 Subtotal			16.00	100%	40%	0%	-	-											
	Total	Complete	21.00	21.00	100%	100%	0%	-	-											

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

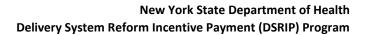
Hide Reviewer Comments

	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





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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 White non-Hispanics	Pass & Ongoing	1



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

Staten Island Performing Provider System, LLC - Project 4.b.ii

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Total 16.00