

**Print Summary** 

Print All

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

> Achievement Value (AV) Scorecard New York City Health and Hospitals Corporations

|            | PPS Information  |  |  |  |  |  |
|------------|--|--|--|--|--|--|
| Quarter    | DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) |  |  |  |  |  |
| PPS        | New York City Health and Hospitals Corporations            |  |  |  |  |  |
| PPS Number | 52   |  |  |  |  |  |

| A  | Achievement Value (AV) Scorecard Summary |             |                  |                    |                             |                                     |  |  |  |  |
|--|--|-------------|------------------|--------------------|-----------------------------|-------------------------------------|--|--|--|--|
| Project Link (click on the purple link below to access |  | AV I        | Data             |                    | Payment Data                |                                     |  |  |  |  |
| each individual project report)                        | AVs Available                            | AVs Awarded | AV<br>Adjustment | Net AVs<br>Awarded | DY2 Q4 Payment<br>Available | DY2 Q4 Payment<br>Earned            |  |  |  |  |
| Domain I - Organizational (All Projects)               | 5.00                                     | 5.00        | 0.00             | 5.00               |                             | nds are embedded<br>oject's payment |  |  |  |  |
| 2.a.i  | 21.00                                    | 21.00       | 0.00             | 21.00              | \$ 15,841,871               | \$ 15,841,871                       |  |  |  |  |
| 2.a.iii  | 22.00                                    | 21.00       | 0.00             | 21.00              | \$ 12,697,954               | \$ 11,609,558                       |  |  |  |  |
| 2.b.iii  | 22.00                                    | 22.00       | 0.00             | 22.00              | \$ 11,955,020               | \$ 11,955,020                       |  |  |  |  |
| 2.b.iv   | 22.00                                    | 22.00       | 0.00             | 22.00              | \$ 11,825,826               | \$ 11,825,826                       |  |  |  |  |
| 2.d.i  | 11.00                                    | 11.00       | 0.00             | 11.00              | \$ 14,198,704               | \$ 14,198,704                       |  |  |  |  |
| 3.a.i  | 15.50                                    | 13.00       | 0.00             | 13.00              | \$ 13,803,349               | \$ 10,617,961                       |  |  |  |  |
| 3.b.i  | 14.00                                    | 14.00       | 0.00             | 14.00              | \$ 10,492,217               | \$ 10,492,217                       |  |  |  |  |
| 3.d.ii   | 15.00                                    | 13.80       | 0.00             | 13.80              | \$ 10,812,086               | \$ 9,956,624                        |  |  |  |  |
| 3.g.i  | 12.00                                    | 12.00       | 0.00             | 12.00              | \$ 6,095,182                | \$ 6,095,182                        |  |  |  |  |

| NEW<br>YORK<br>STATE         Department<br>of Health         Medicaid<br>Redesign Team         New York State Department of Health           Delivery System Reform Incentive Payment (DSRIP) Program |        |        |      |            |    |             |    |                                   |
|---|--------|--------|------|------------|----|-------------|----|-----------------------------------|
| Print Summary<br>Print All  |        |        |      | New York C |    |             |    | (AV) Scorecard<br>Is Corporations |
| 4.a.iii   | 16.00  | 16.00  | 0.00 | 16.00      | \$ | 5,657,811   | \$ | 5,657,811                         |
| 4.c.ii  | 16.00  | 16.00  | 0.00 | 16.00      | \$ | 5,374,921   | \$ | 5,374,921                         |
| AV Adjustments (Column F)   |        |        |      |            |    |             |    |                                   |
| Total   | 186.50 | 181.80 | 0.00 | 181.80     | \$ | 118,754,942 | \$ | 113,625,696                       |



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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

| Do   | main I Organizati | onal 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<br>Measure                         | AV<br>Driving      | Milestone                              | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarde |  |  |  |
|  |                    |  |                      |                       |                     |                 |           |  |  |  |
| Workforce<br>Strategy<br>Budget<br>Updates |                    | Workforce Strategy Spending (Baseline) | Ongoing              | N/A                   | Completed           | Pass & Complete |           |  |  |  |



| S   | ave & R<br>Prin |   |           |     |            | Q4 January 1, 2017 - March 31,<br>Is Corporations - Domain 1 Orgo |
|---|-----------------|---|-----------|-----|------------|---|
|   |                 |   |           |     |            |   |
|   |                 | 1. Define target workforce state (in line with DSRIP program's goals)   | N/A       | N/A | In Process | Pass & Ongoing  |
|   | •               | <ol> <li>Create a workforce transition roadmap<br/>for achieving defined target workforce</li> </ol>  | N/A       | N/A | In Process | Pass & Ongoing  |
| Additional<br>Workforce<br>Strategy       | •               | <ol> <li>Perform detailed gap analysis between<br/>current state assessment of workforce<br/>and projected future state</li> </ol>  | N/A       | N/A | In Process | Pass & Ongoing  |
| Budget<br>Updates<br>(non AV-<br>driving) | •               | 4. Produce a compensation and benefit<br>analysis, covering impacts on both<br>retrained and redeployed staff, as well as<br>new hires, particularly focusing on full and<br>partial placements | 6/30/2016 | N/A | Completed  | Pass & Complete   |
|   | •               | 5. Develop training strategy  | 3/31/2017 | N/A | Completed  | Pass & Complete   |
|   |                 | Major Risks to Implementation & Risk<br>Mitigation Strategies   | N/A       | N/A | In Process | Pass & Ongoing  |



| Sa                                   | ave & Re | eturn   |       |                 |                  | 4 January 1, 2017 - March 31, 2 |                |
|--------------------------------------|----------|---|-------|-----------------|------------------|---------------------------------|----------------|
|                                      | Print    |   | Nev   | N YORK CITY HEA | ith and Hospital | s Corporations - Domain 1 Orga  | nizational AVS |
|                                      | •        | Major Dependencies on Organizational<br>Workstreams | N/A   | N/A             | In Process       | Pass & Ongoing                  |                |
| Additional                           | •        | Roles and Responsibilities                          | N/A   | N/A             | In Process       | Pass & Ongoing                  |                |
| Workforce<br>Strategy<br>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                  |                |
|                                      |          | 1   | Total |                 |                  |                                 | 1              |

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



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|      | Pr  | int    |  |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

|                       | Module 1.2 - PPS Budget Report (Quarterly  | Ongoing | N/A | In Process | Pass & Ongoing  |   |
|-----------------------|--|---------|-----|------------|-----------------|---|
| Quarterly<br>Project  |  |         |     |            |                 |   |
| Reports,<br>Project   | Module 1.3 - PPS Flow of Funds (Baseline)  | Ongoing | N/A | Completed  | Pass & Complete | 1 |
| Budget and<br>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   |     |            |                 | 1 |

|                    | Section 02 - Governance |  |                      |                       |                     |                 |            |  |
|--------------------|-------------------------|--|----------------------|-----------------------|---------------------|-----------------|------------|--|
| Process<br>Measure | AV<br>Driving           | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |  |
|                    |                         | 1. Finalize governance structure and sub-<br>committee structure | 6/30/2015            | N/A                   | Completed           | Pass & Complete |            |  |
|                    |                         |  |                      |                       |                     |                 |            |  |
|                    |                         | 2. Establish a clinical governance                               |                      |                       |                     |                 |            |  |
| Governance         |                         | structure, including clinical quality                            | 12/31/2015           | N/A                   | Completed           | Pass & Complete |            |  |
| Structure          |                         | committees for each DSRIP project                                |                      |                       |                     |                 |            |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

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



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

# Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

| [                        | 9. Inclusion of CBOs in PPS<br>Implementation                 | N/A   | N/A | In Process | Pass & Ongoing |     |
|--------------------------|---|-------|-----|------------|----------------|-----|
|                          |   |       |     |            |                |     |
|                          | Major Risks to Implementation & Risk<br>Mitigation Strategies | N/A   | N/A | In Process | Pass & Ongoing |     |
|                          |   |       |     |            |                |     |
|                          | Major Dependencies on Organizational<br>Workstreams           | N/A   | N/A | In Process | Pass & Ongoing |     |
|                          |   |       |     |            |                |     |
|                          | Roles and Responsibilities                                    | N/A   | N/A | In Process | Pass & Ongoing |     |
| Additional<br>Governance |   |       |     |            |                | N/A |
| 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 |     |            |                | 1   |

Section 03 - Financial Sustainability



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

| Process<br>Measure  | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|---------------------|---------------|--|----------------------|-----------------------|---------------------|-----------------|------------|
|                     |               | 1. Finalize PPS finance structure, including reporting structure   | 12/31/2015           | N/A                   | Completed           | Pass & Complete |            |
|                     |               |  |                      |                       |                     |                 |            |
|                     |               | 2. Perform network financial health<br>current state assessment and develop<br>financial sustainability strategy to address<br>key issues. | 3/31/2016            | N/A                   | Completed           | Pass & Complete |            |
| Financial           |               |  |                      |                       |                     |                 |            |
| Stability<br>Update |               | <ol> <li>Finalize Compliance Plan consistent<br/>with New York State Social Services Law<br/>363-d</li> </ol>                              | 12/31/2015           | N/A                   | Completed           | Pass & Complete | 1          |
|                     |               |  |                      |                       |                     |                 |            |
|                     |               | 4. Develop a Value Based Needs<br>Assessment "VNA"   | 3/31/2017            | N/A                   | Completed           | Pass & Complete |            |
|                     |               |  |                      |                       |                     |                 |            |
|                     |               | Major Risks to Implementation & Risk<br>Mitigation Strategies  | N/A                  | N/A                   | In Process          | Pass & Ongoing  |            |
|                     |               |  |                      |                       |                     |                 |            |
|                     |               | Major Dependencies on Organizational<br>Workstreams  | N/A                  | N/A                   | In Process          | Pass & Ongoing  |            |
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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

|                          | Roles and Responsibilities | N/A   | N/A | In Process | Pass & Ongoing |      |
|--------------------------|----------------------------|-------|-----|------------|----------------|------|
| Additional<br>Financial  |                            |       |     |            |                | N/A  |
| Stability<br>Topic Areas | Key Stakeholders           | N/A   | N/A | In Process | Pass & Ongoing | 11/2 |
|                          |                            |       |     |            |                |      |
|                          | 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        | Literacy            |                 |            |
|---|---------------|--|----------------------|-----------------------|---------------------|-----------------|------------|
| Process<br>Measure                            | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|   |               | <ol> <li>Finalize cultural competency / health<br/>literacy strategy.</li> </ol>   | 12/31/2015           | N/A                   | Completed           | Pass & Complete |            |
| Cultural<br>Competency<br>/Health<br>Literacy |               | <ol> <li>Develop a training strategy focused on<br/>addressing the drivers of health disparities<br/>(beyond the availability of language-<br/>appropriate material).</li> </ol> | 6/30/2016            | N/A                   | Completed           | Pass & Complete | 1          |



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

|                        | Major Risks to Implementation & Risk<br>Mitigation Strategies | N/A   | N/A | In Process | Pass & Ongoing |     |
|------------------------|---|-------|-----|------------|----------------|-----|
|                        |   |       |     |            |                |     |
|                        | Major Dependencies on Organizational<br>Workstreams           | N/A   | N/A | In Process | Pass & Ongoing |     |
|                        |   |       |     |            |                |     |
| Additional             | Roles and Responsibilities                                    | N/A   | N/A | In Process | Pass & Ongoing |     |
| Cultural<br>Competency |   |       |     |            |                | N/A |
| /Health<br>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<br>⁄Ieasure                   | AV<br>Driving | Milestone | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |

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

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|--------------------------------|-------|--|-----------|-----|------------|---|-----|
|                                | •     | 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). | 3/31/2016 | N/A | Complete   | Pass & Complete   |     |
|                                |       |  |           |     |            |   |     |
|                                |       | 2. Develop an IT Change Management Strategy.   | 9/30/2016 | N/A | Complete   | Pass & Complete   |     |
|                                |       |  |           |     |            |   |     |
| IT Systems<br>and<br>Processes |       | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network   | 9/30/2016 | N/A | Complete   | Pass & Complete   | N/A |
|                                |       |  |           |     |            |   |     |
|                                |       | 4. Develop a specific plan for engaging attributed members in Qualifying Entities  | N/A       | N/A | In Process | Pass & Ongoing  |     |
|                                |       |  |           |     |            |   |     |
|                                |       | 5. Develop a data security and confidentiality plan.   | 6/30/2016 | N/A | Complete   | Pass & Complete   |     |
|                                |       |  |           |     |            |   |     |
|                                |       | Major Risks to Implementation & Risk<br>Mitigation Strategies  | N/A       | N/A | In Process | Pass & Ongoing  |     |
|                                |       |  |           |     |            |   |     |
|                                |       | Major Dependencies on Organizational<br>Workstreams  | N/A       | N/A | In Process | Pass & Ongoing  |     |

Achievement Value (AV) Scorecard DV2 OA January 1 2017 March 21 2017 (Daymont



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

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|--------------------------|-------|----------------------------|-------|-----|------------|----------------|
| Additional               |       |                            |       |     |            |                |
| IT Systems<br>and        |       | Roles and Responsibilities | N/A   | N/A | In Process | Pass & Ongoing |
| Processes<br>Topic Areas |       |                            |       |     |            |                |
| TOPIC Aleas              |       | 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<br>Measure        | AV<br>Driving                      | Milestone   | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |  |
|                           |                                    | <ol> <li>Establish reporting structure for PPS-<br/>wide performance reporting and<br/>communication.</li> </ol>                                      | 9/30/2016            | N/A                   | Completed           | Pass & Complete | N/A        |  |
| Performanc<br>e Reporting | •                                  | 2. Develop training program for<br>organizations and individuals throughout<br>the network, focused on clinical quality<br>and performance reporting. | 3/31/2017            | N/A                   | Completed           | Pass & Complete | N/A        |  |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

|                            |   | Total |     |            |                | 0   |
|----------------------------|---|-------|-----|------------|----------------|-----|
|                            |   |       |     |            |                |     |
|                            | Progress Reporting  | N/A   | N/A | In Process | Pass & Ongoing |     |
|                            |   |       |     |            |                |     |
|                            | IT Expectations   | N/A   | N/A | In Process | Pass & Ongoing |     |
|                            |   |       |     |            |                |     |
| e Reporting<br>Topic Areas | Key Stakeholders  | N/A   | N/A | In Process | Pass & Ongoing | N/A |
| Additional<br>Performanc   |   |       |     |            |                | N/A |
|                            | Roles and Responsibilities                                    | N/A   | N/A | In Process | Pass & Ongoing |     |
|                            |   |       |     |            |                |     |
|                            | Major Dependencies on Organizational<br>Workstreams           | N/A   | N/A | In Process | Pass & Ongoing |     |
|                            |   |       |     |            |                |     |
|                            | Major Risks to Implementation & Risk<br>Mitigation Strategies | N/A   | N/A | In Process | Pass & Ongoing |     |

|                    | Section 07 - Practitioner Engagement |   |           |     |           |                 |  |  |  |
|--------------------|--------------------------------------|---|-----------|-----|-----------|-----------------|--|--|--|
| Process<br>Measure | Milestone AV Award                   |   |           |     |           |                 |  |  |  |
|                    |                                      | 1. Develop Practitioners communication and engagement plan. | 6/30/2016 | N/A | Completed | Pass & Complete |  |  |  |

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#### Print 2. Develop training / education plan Practitioner N/A targeting practioners and other Engagement Pass & Complete professional groups, designed to educate 6/30/2016 N/A Completed them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A Pass & Ongoing N/A In Process Workstreams Roles and Responsibilities N/A N/A In Process Pass & Ongoing Additional Practitioner N/A Engagement Key Stakeholders N/A N/A Pass & Ongoing In Process Topic Areas

N/A

N/A

In Process

In Process

N/A

N/A

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

**IT Expectations** 

Progress Reporting

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|                          |               | Section   | 08 - Population      | Health Managen        | nent                |                 |           |
|--------------------------|---------------|---|----------------------|-----------------------|---------------------|-----------------|-----------|
| Process<br>Measure       | AV<br>Driving | Milestone   | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarde |
|                          |               | <ol> <li>Develop population health<br/>management roadmap.</li> </ol> | 9/30/2016            | N/A                   | Complete            | Pass & Complete | N/A       |
| Population               |               |   |                      |                       |                     |                 |           |
| Health                   |               | 2. Finalize PPS-wide bed reduction plan.                              | N/A                  | N/A                   | In Process          | Pass & Ongoing  | N/A       |
|                          |               |   |                      |                       |                     |                 |           |
|                          |               | Major Risks to Implementation & Risk<br>Mitigation Strategies         | N/A                  | N/A                   | In Process          | Pass & Ongoing  |           |
|                          |               |   |                      |                       |                     |                 |           |
|                          |               | Major Dependencies on Organizational<br>Workstreams                   | N/A                  | N/A                   | In Process          | Pass & Ongoing  |           |
|                          |               |   |                      |                       |                     |                 |           |
|                          |               | Roles and Responsibilities  | N/A                  | N/A                   | In Process          | Pass & Ongoing  |           |
| Additional<br>Population |               |   |                      |                       |                     |                 | N/A       |
| Health Topic<br>Areas    |               | Key Stakeholders  | N/A                  | N/A                   | In Process          | Pass & Ongoing  | .,        |
|                          |               |   |                      |                       |                     |                 |           |

# Delivery System Reform Incentive Payment (DSRIP) Program



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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment New York City Health and Hospitals Corporations - Domain 1 Organizational AVs

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

|                    |               |  | Section 09 - Clinic  | al Integration        |                     |                 |            |
|--------------------|---------------|--|----------------------|-----------------------|---------------------|-----------------|------------|
| Process<br>Measure | AV<br>Driving | Milestone  | Required Due<br>Date | Committed Due<br>Date | Milestone<br>Status | Reviewer Status | AV Awarded |
|                    |               | <ol> <li>Perform a clinical integration 'needs<br/>assessment'.</li> </ol> | 6/30/2016            | N/A                   | Completed           | Pass & Complete | N/A        |
| Clinical           |               |  |                      |                       |                     |                 | N/A        |
| Integration        |               | 2. Develop a Clinical Integration strategy.                                | N/A                  | N/A                   | In Process          | Pass & Ongoing  | N/A        |
|                    |               |  |                      |                       |                     |                 | N/A        |
|                    |               | Major Risks to Implementation & Risk<br>Mitigation Strategies              | N/A                  | N/A                   | In Process          | Pass & Ongoing  |            |
|                    |               |  |                      |                       |                     |                 |            |
|                    |               | Major Dependencies on Organizational<br>Workstreams                        | N/A                  | N/A                   | In Process          | Pass & Ongoing  |            |
|                    |               |  |                      |                       |                     |                 |            |
|                    |               | Roles and Responsibilities   | N/A                  | N/A                   | In Process          | Pass & Ongoing  |            |



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|----------------------------|-------|--------------------|-------|------------------|-----------------|----------------------------------|----------------|
|                            | Print |                    | Nev   | v York City Heal | th and Hospital | s Corporations - Domain 1 Orga   | nizational AVs |
| Additional<br>Clinical     |       |                    |       |                  |                 |                                  | N/A            |
| Integration<br>Topic Areas |       | Key Stakeholders   | N/A   | N/A              | In Process      | Pass & Ongoing                   | 170            |
|                            |       |                    |       |                  |                 |                                  |                |
|                            |       | IT Expectations    | N/A   | N/A              | In Process      | Pass & Ongoing                   |                |
|                            |       |                    |       |                  |                 |                                  |                |
|                            |       | Progress Reporting | N/A   | N/A              | In Process      | Pass & Ongoing                   |                |
|                            |       |                    |       |                  |                 |                                  |                |
|                            |       |                    | Total |                  |                 |                                  | 0              |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations AV Adju.

| AV Adjustment Scoresheet                             |         |                |           |                                  |      |                   |          |                 |               |  |
|--|---------|----------------|-----------|----------------------------------|------|-------------------|----------|-----------------|---------------|--|
|  | AVs Per | AV/2 Dor Total |           | Total Total AVs Awarded Adjusted |      | Total AVs Awarded |          | Net AVs Awarded |               |  |
| Adjustment   | Project | Projects       | Projects  | Available                        | Net  | Percentage        | AUJUSTEU | Net             | Percentage AV |  |
|  |         | Selected       | Available | Awarded                          | AV   | AVS               | Awarded  | Fercentage 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          | 131.50    | 126.80                           | 96%  | 0.00              | 126.80   | 96%             |               |  |
| Total  |         |                | 186.50    | 181.80                           | 97%  | 0.00              | 181.80   | 97%             |               |  |

Hide Reviewer Comments

Organizational

Project Adjustments

| No AV Adjustments   |
|---|
| Please note that there are no AV adjustments for New York City Health and Hospitals Corporations in DY2, Q1 |
|   |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.a.i

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

| Payment Snapshot         |                  |
|--------------------------|------------------|
| DY2 Q4 Payment Available | \$<br>15,841,871 |
| DY2 Q4 Payment Earned    | \$<br>15,841,871 |

|          | 2.a.i Scoresheet                   |               |                  |                    |                  |                              |                                  |                              |                               |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              | 30%                              | 9,505,123                    | 9,505,123                     |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             | 60%                          |                                  |                              |                               |
|          | Patient Engagement Speed           | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |
|          | Domain 1 Subtotal                  |               | 6.00             | 6.00               | 100%             | 60%                          | 30%                              | 9,505,123                    | 9,505,123                     |
| Domain 2 | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 6,336,748                    | 6,336,748                     |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |
|          | Domain 2 Subtotal                  |               | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 6,336,748                    | 6,336,748                     |
|          | Total Complete                     |               | 21.00            | 21.00              | 100%             | 100%                         | 50%                              | 15,841,871                   | 15,841,871                    |

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

## Hide Reviewer Comments

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



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| Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1.00 |  |  |  |
|---|---------|-----|------------|----------------|------|--|--|--|
| Enter Reviewer Comment                  |         |     |            |                |      |  |  |  |
| Total                                   |         |     |            |                |      |  |  |  |

|            | Domain 1 Project Prescribed N  | lilestones - P       | roject 2.a.i          |                     |                 |                |  |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |  |
| •          | 1. All PPS providers must be included in the Integrated Delivery System.<br>The IDS should include all medical, behavioral, post-acute, long-term<br>care, and community-based service providers within the PPS network;<br>additionally, the IDS structure must include payers and social service<br>organizations, as necessary to support its strategy. |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |  |
|            | Enter Revie  | wer Commer           | nt                    |                     |                 |                |  |  |  |
|            | 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 & Complete | 0.33           |  |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |  |
|            | 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 & Complete | 0.33           |  |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |  |
| •          | 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.                                       |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |  |



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|   | Enter Reviewer Comment  |            |           |            |                 |      |  |  |  |
|---|---|------------|-----------|------------|-----------------|------|--|--|--|
|   | 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.  |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
|   | Enter Revie   | wer Commer | nt        |            |                 |      |  |  |  |
|   | 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.  |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
|   | Enter Revie   | wer Commer | nt        |            |                 |      |  |  |  |
| • | 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. |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
|   | Enter Reviewer Comment  |            |           |            |                 |      |  |  |  |
|   | 8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.  |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
|   | Enter Revie   | wer Commer | nt        |            |                 |      |  |  |  |
|   | 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 & Complete | 0.33 |  |  |  |
|   | Enter Revie   | wer Commer | nt        |            |                 |      |  |  |  |
|   | 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.   |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
|   | Enter Revie   | wer Commer | nt        |            |                 |      |  |  |  |



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| 11. Engage patients in the integrated delivery system through outreach<br>and navigation activities, leveraging community health workers, peers,<br>and culturally competent community-based organizations, as |             | In Process | Pass & Ongoing | N/A |  |
|--|-------------|------------|----------------|-----|--|
| Enter Review   | ver Comment |            |                |     |  |
| Total  |             |            |                |     |  |

|            | Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.i (all Milestones are P4R           | in DY2)         |                |
|------------|--|-----------------|----------------|
| AV Driving | Measure  | Reviewer Status | AVs<br>Awarded |
|            | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1              |
|            | Enter Reviewer Comment   |                 |                |
|            | Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing  | 0.25           |
|            | Enter Reviewer Comment   |                 |                |



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| Children's Access to Primary Care- 25 months to 6 years                      | Pass & Ongoing | 0.25 |
|--|----------------|------|
| Enter Reviewer Comment   |                |      |
| Children's Access to Primary Care- 7 to 11 years                             | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment   |                |      |
| Children's Access to Primary Care- 12 to 19 years                            | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment   |                |      |
| Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)        | Pass & Ongoing | 0.5  |
| Enter Reviewer Comment   |                |      |
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25)                 | Pass & Ongoing | 0.5  |
| Enter Reviewer Comment   |                |      |
| H-CAHPS – Care Transition Metrics  | Pass & Ongoing | 1    |
| Enter Reviewer Comment   |                |      |
| Medicaid Spending on ER and Inpatient Services ±                             | Pass & Ongoing | 1    |
| Enter Reviewer Comment   |                |      |
| Medicaid spending on Primary Care and community based behavioral health care | Pass & Ongoing | 1    |



#### Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.a.i Print Enter Reviewer Comment PDI 90– Composite of all measures +/-Pass & Ongoing 1 Enter Reviewer Comment Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able Pass & Ongoing 1 to participate in bidirectional exchange Enter Reviewer Comment Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards Pass & Ongoing 1 Enter Reviewer Comment Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS Pass & Ongoing 1 reimbursement Enter Reviewer Comment Potentially Avoidable Emergency Room Visits Pass & Ongoing 1 Enter Reviewer Comment Potentially Avoidable Readmissions Pass & Ongoing 1 Enter Reviewer Comment PQI 90 – Composite of all measures +/-Pass & Ongoing 1 Enter Reviewer Comment

| NY S | EW<br>ORK<br>TATE<br>of Health | Medicaid<br>Redesign Team |  | New York State Departme<br>m Incentive Payment (DSF   |       |
|------|--------------------------------|---------------------------|--|---|-------|
|      | Save & Return<br>Print         |                           | Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017<br>New York City Health and | 7 - March 31, 2017 (Payme<br>Hospitals Corporations - |       |
|      | Primary Care - Length          | of Relationship - Q3      |  | Pass & Ongoing  | 0.5   |
|      |                                |                           | Enter Reviewer Comment   |   |       |
|      | Primary Care - Usual So        | ource of Care - Q2        |  | Pass & Ongoing  | 0.5   |
|      |                                |                           | Enter Reviewer Comment   |   |       |
|      |                                |                           | Total  |   | 15.00 |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Iew York City Health and Hospitals Corporations - Project 2.a.iii

|  | Project Snapshot                                   |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Project Domain System Transformation Projects (Domain 2) |  |  |  |  |  |  |
| Project ID   | 2.a.iii  |  |  |  |  |  |
|  | Health Home At-Risk Intervention Program:          |  |  |  |  |  |
| Project Title  | Proactive management of higher risk patients not   |  |  |  |  |  |
|  | currently eligible for Health Homes through access |  |  |  |  |  |

| Payment Snapshot         |                  |
|--------------------------|------------------|
| DY2 Q4 Payment Available | \$<br>12,697,954 |
| DY2 Q4 Payment Earned    | \$<br>11,609,558 |

| 2.a.iii Scoresheet |                                    |               |                  |                    |                  |                              |                                  |                              |                               |
|--------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain             | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|                    | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |
| Domain 1           | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | 7,618,772                    | 6,530,376                     |
|                    | Patient Engagement Speed           | Complete      | 1.00             | 0.00               | 0%               |                              |                                  |                              |                               |
|                    | Domain 1 Subtotal                  |               | 7.00             | 6.00               | 86%              | 60%                          | 30%                              | 7,618,772                    | 6,530,376                     |
| Domain 2           | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 5,079,181                    | 5,079,181                     |
| Domain 2           | Domain 2 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |
|                    | Domain 2 Subtotal                  |               | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 5,079,181                    | 5,079,181                     |
|                    | Total                              | Complete      | 22.00            | 21.00              | 95%              | 100%                         | 50%                              | 12,697,954                   | 11,609,558                    |

Total Project 2.a.iii AVs Awarded: 21 out of 22

## Hide Reviewer Comments

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

| Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) |  |
|---|--|
| lew York City Health and Hospitals Corporations - Project 2.a.iii                           |  |
|   |  |

| Enter Reviewer Comment                  |         |     |           |                |      |  |  |
|---|---------|-----|-----------|----------------|------|--|--|
| Module 2 - Project Implementation Speed | Ongoing | N/A | Completed | Pass & Ongoing | 1.00 |  |  |
| Enter Reviewer Comment                  |         |     |           |                |      |  |  |
| Module 3 - Patient Engagement Speed     | Ongoing | N/A | Completed | Fail           | 0    |  |  |
| Enter Reviewer Comment                  |         |     |           |                |      |  |  |
| Total                                   |         |     |           |                | 1.00 |  |  |

|            | Domain 1 Project Prescribed Milestones - Project 2.a.iii   |           |  |            |                 |                |  |  |  |
|------------|--|-----------|--|------------|-----------------|----------------|--|--|--|
| AV Driving | g Project Requirement and Metric/Deliverable   |           | Committed Milestone<br>Due Date Status |            | Reviewer Status | AVs<br>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                              | Completed  | Pass & Complete | 0.25           |  |  |  |
|            | Enter Reviewer Comment   |           |  |            |                 |                |  |  |  |
|            | 2. Ensure all primary care providers participating in the project meet<br>NCQA (2011) accredited Patient Centered Medical Home, Level 3<br>standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced<br>Primary Care accreditation by Demonstration Year (DY) 3.                     |           |  | In Process | Pass & Ongoing  | N/A            |  |  |  |
|            | Enter Reviewer Comment   |           |  |            |                 |                |  |  |  |
|            | 3. Ensure that all participating safety net providers are actively sharing<br>EHR systems with local health information exchange/RHIO/SHIN-NY and<br>sharing health information among clinical partners, including direct<br>exchange (secure messaging), alerts and patient record look up. |           |  | In Process | Pass & Ongoing  | N/A            |  |  |  |

NEW YORK STATE Of Health Medicaid Redesign Team

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| Enter Reviewer Comment   |            |           |            |                 |      |  |  |  |
|--|------------|-----------|------------|-----------------|------|--|--|--|
| 4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.  |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
| Enter Revie  | wer Commen | nt        |            |                 |      |  |  |  |
| 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.   |            |           | In Process | Pass & Ongoing  | N/A  |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |  |
| 6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.   |            |           | Completed  | Pass & Complete | N/A  |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |  |
| 7. Establish partnerships between primary care providers and the local<br>Health Home for care management services. This plan should clearly<br>delineate roles and responsibilities for both parties.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.25 |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |  |
| <ul> <li>8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services.</li> <li>Where necessary, the provider will work with local government units (such as SPOAs and public health departments).</li> </ul> | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.25 |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |  |
| <ol> <li>9. Implement evidence-based practice guidelines to address risk factor<br/>reduction as well as to ensure appropriate management of chronic<br/>diseases. Develop educational materials consistent with cultural and<br/>linguistic needs of the population.</li> </ol>           | 3/31/2017  | 3/31/2017 | Completed  | Pass & Ongoing  | 0.25 |  |  |  |

## Delivery System Reform Incentive Payment (DSRIP) Program Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

lew York City Health and Hospitals Corporations - Project 2.a.iii

New York State Department of Health

|   | Enter Reviewer Comment |      |
|---|------------------------|------|
| Т | otal                   | 1.00 |

|            | Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.iii (all Milestones are P4R         | in DY2)         |                |
|------------|--|-----------------|----------------|
| AV Driving | Measure  | Reviewer Status | AVs<br>Awarded |
|            | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                       | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                       | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing  | 0.3333333      |
|            | Enter Reviewer Comment   |                 |                |
|            | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing  | 1              |
|            | Enter Reviewer Comment   |                 |                |
|            | Children's Access to Primary Care- 12 to 19 years  | Pass & Ongoing  | 0.25           |
|            | Enter Reviewer Comment   |                 |                |
|            | Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing  | 0.25           |

# NEW YORK Department of Health Medicaid Redesign Team

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| Enter Reviewer Comment   |                |          |
|--|----------------|----------|
| Children's Access to Primary Care- 25 months to 6 years                      | Pass & Ongoing | 0.25     |
| Enter Reviewer Comment   |                | <u> </u> |
| Children's Access to Primary Care- 7 to 11 years                             | Pass & Ongoing | 0.25     |
| Enter Reviewer Comment   |                |          |
| Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)        | Pass & Ongoing | 0.5      |
| Enter Reviewer Comment   |                |          |
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25)                 | Pass & Ongoing | 0.5      |
| Enter Reviewer Comment   |                | ·        |
| H-CAHPS – Care Transition Metrics  | Pass & Ongoing | 1        |
| Enter Reviewer Comment   |                | ·        |
| Medicaid Spending on ER and Inpatient Services ±                             | Pass & Ongoing | 1        |
| Enter Reviewer Comment   |                | ·        |
| Medicaid spending on Primary Care and community based behavioral health care | Pass & Ongoing | 1        |
| Enter Reviewer Comment   |                |          |
| PDI 90– Composite of all measures +/-  | Pass & Ongoing | 1        |



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## Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Iew York City Health and Hospitals Corporations - Project 2.a.iii

Enter Reviewer Comment Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and Pass & Ongoing 1 able to participate in bidirectional exchange Enter Reviewer Comment Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards Pass & Ongoing 1 Enter Reviewer Comment Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS Pass & Ongoing 1 reimbursement Enter Reviewer Comment Potentially Avoidable Emergency Room Visits Pass & Ongoing 1 Enter Reviewer Comment Potentially Avoidable Readmissions Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing PQI 90 - Composite of all measures +/-1 Enter Reviewer Comment Primary Care - Length of Relationship - Q3 Pass & Ongoing 0.5 Enter Reviewer Comment

| NI YC   | EW<br>DRK<br>IATE<br>of Health        |  | New York State Departme<br>n Incentive Payment (DSF |     |  |
|---------|---------------------------------------|--|---|-----|--|
|         | Save & Return<br>Print                | Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017<br>lew York City Health and F |   |     |  |
|         | Primary Care - Usual Source of Care - | Q2   | Pass & Ongoing                                      | 0.5 |  |
|         |                                       | Enter Reviewer Comment   |   | -   |  |
| Total 1 |                                       |  |   |     |  |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) lew York City Health and Hospitals Corporations - Project 2.b.iii

|                | Project Snapshot                       |   | Payment Snapshot         |                  |
|----------------|--|---|--------------------------|------------------|
| Project Domain | System Transformation Projects         | 1 | DY2 Q4 Payment Available | \$<br>11,955,020 |
| Project ID     | 2.b.iii                                | 1 | DY2 Q4 Payment Earned    | \$<br>11,955,020 |
| Project Title  | ED care triage for at-risk populations |   |                          |                  |

|          | 2.b.iii Scoresheet                 |               |                  |                    |                  |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |  |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |  |  |  |  |  |  |  |  |  |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |  |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 7,173,012                    | 7,173,012                     |  |  |  |  |  |  |  |  |  |  |  |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |  |  |  |  |  |  |  |  |  |  |
|          | Domain 1 Subtotal                  |               |                  | 7.00               | 100%             | 60%                          | 30%                              | 7,173,012                    | 7,173,012                     |  |  |  |  |  |  |  |  |  |  |  |  |
| Domain 2 | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 4,782,008                    | 4,782,008                     |  |  |  |  |  |  |  |  |  |  |  |  |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |  |  |  |  |  |  |  |  |  |  |  |  |
|          | Domain 2 Subtotal                  |               |                  | 15.00              | 100%             | 40%                          | 20%                              | 4,782,008                    | 4,782,008                     |  |  |  |  |  |  |  |  |  |  |  |  |
|          | Total                              | Complete      | 22.00            | 22.00              | 100%             | 100%                         | 50%                              | 11,955,020                   | 11,955,020                    |  |  |  |  |  |  |  |  |  |  |  |  |

Total Project 2.b.iii AVs Awarded: 22 out of 22

## Hide Reviewer Comments

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

| Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) |
|---|
| lew York City Health and Hospitals Corporations - Project 2.b.iii                           |
|   |

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|---|---|---------|---------------|----------------|----------------|-------------|--|--|--|
| - | Enter Reviewer Comment                  |         |               |                |                |             |  |  |  |
|   | Module 2 - Project Implementation Speed | Ongoing | N/A           | In Process     | Pass & Ongoing | 1.00        |  |  |  |
|   | Enter Reviewer Comment                  |         |               |                |                |             |  |  |  |
|   | Module 3 - Patient Engagement Speed     | Ongoing | N/A           | In Process     | Pass & Ongoing | 1           |  |  |  |
|   | Enter Reviewer Comment                  |         |               |                |                |             |  |  |  |
|   | Total                                   |         |               |                |                | 2.00        |  |  |  |

| Domain 1 Project Prescribed Milestones - Project 2.b.iii |   |                      |                       |                     |                 |                |
|--|---|----------------------|-----------------------|---------------------|-----------------|----------------|
| AV Driving   | Project Requirement and Metric/Deliverable  | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |
|  | 1. Establish ED care triage program for at-risk populations   |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|  | Enter Reviewer Comment  |                      |                       |                     |                 |                |
| •  | <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>a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.</li> <li>b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.</li> </ol> |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|  | Enter Reviewer Comment  |                      |                       |                     |                 |                |



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|-------|--|-----------|-----------|------------|---|------|
|       | Print  |           |           |            |   | •    |
|       | <ul> <li>3. For patients presenting with minor illnesses who do not have a primary care provider:</li> <li>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.</li> <li>b. Patient navigator will assist the patient with identifying and accessing needed community support resources.</li> <li>c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care</li> </ul> |           |           | In Process | Pass & Ongoing  | N/A  |
|       | Enter Reviewer Comment   |           |           |            |   |      |
| •     | 4. Established protocols allowing ED and first responders - under<br>supervision of the ED practitioners - to transport patients with non-acute<br>disorders to alternate care sites including the PCMH to receive more<br>appropriate level of care. (This requirement is optional.)  | 3/31/2017 | 3/31/2017 | Completed  | Pass (with Exception) & Complete                        | 0.50 |
|       | Enter Reviewer Comment   |           |           |            |   |      |
| •     | 5. Use EHRs and other technical platforms to track all patients engaged in the project.  | 3/31/2017 | 3/31/2017 | Completed  | Pass & Complete   | 0.50 |
|       | Enter Reviewer Comment   |           |           |            |   |      |
| Total |  |           |           |            |   | 1.00 |

| Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iii (all Milestones are P4R in DY2) |  |                        |                |  |  |  |  |  |
|--|--|------------------------|----------------|--|--|--|--|--|
| AV Driving   | Measure  | <b>Reviewer Status</b> | AVs<br>Awarded |  |  |  |  |  |
|  | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing         | 0.3333333      |  |  |  |  |  |
|  | Enter Reviewer Comment   |                        |                |  |  |  |  |  |

# Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) lew York City Health and Hospitals Corporations - Project 2.b.iii

|  | Adult Access to Preventive or Ambulatory Care - 45 to 64 years  Enter Reviewer Comment               |                | 0.3333333 |
|--|--|----------------|-----------|
|  |  |                |           |
|  | Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing | 0.3333333 |
|  | Enter Reviewer Comment   |                |           |
|  | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1         |
|  | Enter Reviewer Comment   |                |           |
|  | Children's Access to Primary Care- 12 to 19 years  | Pass & Ongoing | 0.25      |
|  | Enter Reviewer Comment   |                |           |
|  | Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing | 0.25      |
|  | Enter Reviewer Comment   |                |           |
|  | Children's Access to Primary Care- 25 months to 6 years  | Pass & Ongoing | 0.25      |
|  | Enter Reviewer Comment   |                |           |
|  | Children's Access to Primary Care- 7 to 11 years   | Pass & Ongoing | 0.25      |
|  | Enter Reviewer Comment   |                |           |
|  | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing | 0.5       |

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Iew York City Health and Hospitals Corporations - Project 2.b.iii

| Enter Reviewer Comment  |                |     |
|---|----------------|-----|
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25)  | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment  |                |     |
| H-CAHPS – Care Transition Metrics   |                | 1   |
| Enter Reviewer Comment  |                |     |
| Medicaid Spending on ER and Inpatient Services ±  | Pass & Ongoing | 1   |
| Enter Reviewer Comment  |                |     |
| Medicaid spending on Primary Care and community based behavioral health care  | Pass & Ongoing | 1   |
| Enter Reviewer Comment  |                |     |
| PDI 90– Composite of all measures +/-   | Pass & Ongoing | 1   |
| Enter Reviewer Comment  |                |     |
| Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange | Pass & Ongoing | 1   |
| Enter Reviewer Comment  |                |     |
| Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards   | Pass & Ongoing | 1   |
| Enter Reviewer Comment  |                |     |



| Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Que lew York City Health and Hospitals Corporations - Project |   |                            |                |  |  |
|--|---|----------------------------|----------------|--|--|
| Print  | lew York City Health and  | Hospitals Corporations - P | roject 2.b.ili |  |  |
| Percent of total Medicaid provi<br>reimbursement   | der reimbursement received through sub-capitation or other forms of non-FFS | Pass & Ongoing             | 1              |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
| Potentially Avoidable Emergend   | cy Room Visits  | Pass & Ongoing             | 1              |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
| Potentially Avoidable Readmiss   | ions  | Pass & Ongoing             | 1              |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
| PQI 90 – Composite of all measure  | ures +/-  | Pass & Ongoing             | 1              |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
| Primary Care - Length of Relation  | onship - Q3   | Pass & Ongoing             | 0.5            |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
| Primary Care - Usual Source of   | Care - Q2   | Pass & Ongoing             | 0.5            |  |  |
|  | Enter Reviewer Comment  |                            |                |  |  |
|  | Total   |                            | 15.00          |  |  |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) lew York City Health and Hospitals Corporations - Project 2.b.iv

|                | Project Snapshot   |   | Payment Snapshot         |                  |
|----------------|--|---|--------------------------|------------------|
| Project Domain | System Transformation Projects (Domain 2)  |   | DY2 Q4 Payment Available | \$<br>11,825,826 |
| Project ID     | 2.b.iv   | 1 | DY2 Q4 Payment Earned    | \$<br>11,825,826 |
| Project Title  | Care transitions intervention patients with a care transition plan developed prior to discharge. |   |                          |                  |

|                |                                    |               | 2.b.iv Scores    | sheet              |                  |                              |                                  |                              |                               |  |  |
|----------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|
| Domain         | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |
|                | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  |                              |                               |  |  |
| Domain 1       | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 30%                              | 7,095,496                    | 7,095,496                     |  |  |
|                | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |  |  |
|                | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 7,095,496                    | 7,095,496                     |  |  |
| Domain 2       | Domain 2 Pay for Reporting (P4R)   | Complete      | 15.00            | 15.00              | 100%             | 40%                          | 20%                              | 4,730,331                    | 4,730,331                     |  |  |
| Domain 2       | Domain 2 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |  |  |
|                | Domain 2 Subtotal                  |               |                  | 15.00              | 100%             | 40%                          | 20%                              | 4,730,331                    | 4,730,331                     |  |  |
| Total Complete |                                    | Complete      | 22.00            | 22.00              | 100%             | 100%                         | 50%                              | 11,825,826                   | 11,825,826                    |  |  |

Total Project 2.b.iv AVs Awarded: 22 out of 22

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) lew York City Health and Hospitals Corporations - Project 2.b.iv

| -                      | Enter Reviewer Comment                  |         |     |            |                 |      |
|------------------------|---|---------|-----|------------|-----------------|------|
|                        | Module 2 - Project Implementation Speed | Ongoing | N/A | Completed  | Pass & Complete | 1.00 |
| Enter Reviewer Comment |   |         |     |            |                 |      |
|                        | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing  | 1    |
|                        | Enter Reviewer Comment                  |         |     |            |                 |      |
| Total                  |   |         |     |            | 2.00            |      |

|            | Domain 1 Project Prescribed Milestones - Project 2.b.iv  |                      |                       |                     |                 |                |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |
|            | 1. Develop standardized protocols for a Care Transitions Intervention<br>Model with all participating hospitals, partnering with a home care   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.20           |  |
|            | service or other appropriate community agency. Enter Reviewer Comment  |                      |                       |                     |                 |                |  |
|            | <ol> <li>Engage with the Medicaid Managed Care Organizations and Health<br/>Homes to develop transition of care protocols that will ensure<br/>appropriate post-discharge protocols are followed.</li> </ol> |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |
|            | 3. Ensure required social services participate in the project.   |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |

NEW YORK STATE Of Health Medicaid Redesign Team

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|---|-------------|-----------|-----------|-----------------|------|--|
| 4. Transition of care protocols will include early notification of planned  |             |           |           |                 |      |  |
| discharges and the ability of the transition care manager to visit the      | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |  |
| patient in the hospital to develop the transition of care services.         |             |           |           |                 |      |  |
| Enter Revie   | ewer Commer | nt        |           |                 |      |  |
| 5. Protocols will include care record transitions with timely updates       | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |  |
| provided to the members' providers, particularly primary care provider.     | 5/51/2017   | 5/51/2017 | completed | Pass & complete | 0.20 |  |
| Enter Revie   | ewer Commer | nt        |           |                 |      |  |
| 6. Ensure that a 30-day transition of care period is established.           | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |  |
| Enter Reviewer Comment  |             |           |           |                 |      |  |
| <br>7. Use EHRs and other technical platforms to track all patients engaged |             |           |           |                 |      |  |
| in the project.   | 3/31/2017   | 3/31/2017 | Completed | Pass & Complete | 0.20 |  |

|            | Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.iv (all Milestones are P4R in DY2) |                 |                |  |  |  |
|------------|---|-----------------|----------------|--|--|--|
| AV Driving | Measure   | Reviewer Status | AVs<br>Awarded |  |  |  |
|            | Adult Access to Preventive or Ambulatory Care - 20 to 44 years                                      | Pass & Ongoing  | 0.3333333      |  |  |  |
|            | Enter Reviewer Comment  |                 |                |  |  |  |
| •          | Adult Access to Preventive or Ambulatory Care - 45 to 64 years                                      | Pass & Ongoing  | 0.3333333      |  |  |  |
|            | Enter Reviewer Comment  |                 |                |  |  |  |



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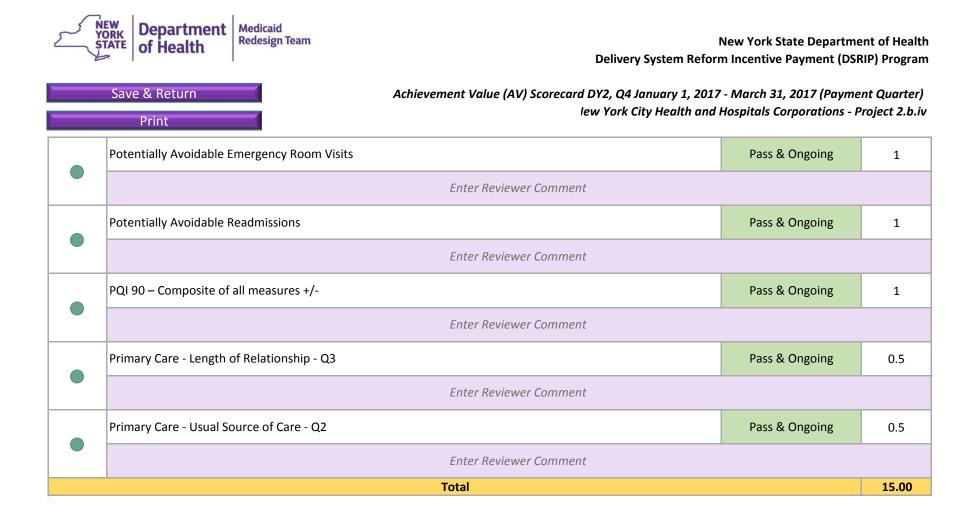
Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Iew York City Health and Hospitals Corporations - Project 2.b.iv

| Adult Access to Preventive or Ambulatory Care - 65 and older   | Pass & Ongoing | 0.3333333 |
|--|----------------|-----------|
| Enter Reviewer Comment   |                |           |
| CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1         |
| Enter Reviewer Comment   |                |           |
| Children's Access to Primary Care- 12 to 19 years  | Pass & Ongoing | 0.25      |
| Enter Reviewer Comment   |                |           |
| Children's Access to Primary Care- 12 to 24 months   | Pass & Ongoing | 0.25      |
| Enter Reviewer Comment   |                |           |
| Children's Access to Primary Care- 25 months to 6 years  | Pass & Ongoing | 0.25      |
| Enter Reviewer Comment   |                |           |
| Children's Access to Primary Care- 7 to 11 years   | Pass & Ongoing | 0.25      |
| Enter Reviewer Comment   |                |           |
| Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)                                | Pass & Ongoing | 0.5       |
| Enter Reviewer Comment   |                |           |
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25)   | Pass & Ongoing | 0.5       |



#### Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) lew York City Health and Hospitals Corporations - Project 2.b.iv Print Enter Reviewer Comment H-CAHPS – Care Transition Metrics Pass & Ongoing 1 Enter Reviewer Comment Medicaid Spending on ER and Inpatient Services ± Pass & Ongoing 1 Enter Reviewer Comment Medicaid spending on Primary Care and community based behavioral health care Pass & Ongoing 1 Enter Reviewer Comment PDI 90- Composite of all measures +/-Pass & Ongoing 1 Enter Reviewer Comment Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and Pass & Ongoing 1 able to participate in bidirectional exchange Enter Reviewer Comment Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards Pass & Ongoing 1 Enter Reviewer Comment Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS Pass & Ongoing 1 reimbursement

Enter Reviewer Comment





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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.d.i

|                       | Project Snapshot                                   | Payment Snapshot |                          |    |            |
|-----------------------|--|------------------|--------------------------|----|------------|
| <b>Project Domain</b> | System Transformation Projects (Domain 2)          | 1                | DY2 Q4 Payment Available | \$ | 14,198,704 |
| Project ID            | 2.d.i  |                  | DY2 Q4 Payment Earned    | \$ | 14,198,704 |
|                       | Implementation of Patient Activation Activities to |                  |                          |    |            |
| Project Title         | Engage, Educate and Integrate the uninsured and    |                  |                          |    |            |
|                       | low/non-utilizing Medicaid populations into        |                  |                          |    |            |

|          |  |               | 2.d.i Scores     | heet               |                  |                              |                                  |                              |                               |
|----------|--|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Component                              | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational                | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |
| Domain 1 | Project Implementation Speed           | Complete      | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | 8,519,223                    | 8,519,223                     |
|          | Patient Engagement Speed               | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |
|          | Domain 1 Subtotal                      |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 8,519,223                    | 8,519,223                     |
| Domain 2 | Domain 2 Pay for Reporting (P4R)       | Complete      | 4.00             | 4.00               | 100%             | 40%                          | 20%                              | 5,679,482                    | 5,679,482                     |
| Domain 2 | Domain 2 Pay for Performance (P4P) N/A |               | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |
|          | Domain 2 Subtotal                      |               |                  | 4.00               | 100%             | 40%                          | 20%                              | 5,679,482                    | 5,679,482                     |
|          | Total                                  | Complete      | 11.00            | 11.00              | 100%             | 100%                         | 50%                              | 14,198,704                   | 14,198,704                    |

Total Project 2.d.i AVs Awarded: 11 out of 11

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



Print Enter Reviewer Comment Module 2 - Project Implementation Speed N/A Pass & Ongoing Ongoing In Process 1.00 Pass & Ongoing Module 3 - Patient Engagement Speed N/A Ongoing In Process 1 Enter Reviewer Comment Total 2.00

Domain 1 Project Prescribed Milestones - Project 2.d.i Required Committed Milestone AVs **Project Requirement and Metric/Deliverable Reviewer Status AV Driving** Due Date Due Date Status Awarded 1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM<sup>®</sup> and other patient activation In Process Pass & Ongoing N/A techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate. Enter Reviewer Comment 2. Establish a PPS-wide training team, comprised of members with 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 training in PAM<sup>®</sup> and expertise in patient activation and engagement. Enter Reviewer Comment 3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 "hot spot" areas. Enter Reviewer Comment

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.d.i



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.d.i

| 4. Survey the targeted population about healthcare needs in the PPS' region.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.125 |  |  |  |  |  |
|--|------------|-----------|------------|-----------------|-------|--|--|--|--|--|
| Enter Reviewer Comment   |            |           |            |                 |       |  |  |  |  |  |
| 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.  |            |           | In Process | Pass & Ongoing  | N/A   |  |  |  |  |  |
| Enter Revie  | wer Commen | nt        |            |                 |       |  |  |  |  |  |
| 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 #10).   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.125 |  |  |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |       |  |  |  |  |  |
| 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM <sup>®</sup> during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period. |            |           | In Process | Pass & Ongoing  | N/A   |  |  |  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |       |  |  |  |  |  |
| 8. Include beneficiaries in development team to promote preventive care.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.125 |  |  |  |  |  |
| Enter Revie  | wer Commen | nt        |            |                 |       |  |  |  |  |  |
| 9. Measure PAM <sup>®</sup> components   |            |           | In Process | Pass & Ongoing  | N/A   |  |  |  |  |  |
| Enter Revie  | wer Commen | nt        |            |                 |       |  |  |  |  |  |
| 10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.   |            |           | In Process | Pass & Ongoing  | N/A   |  |  |  |  |  |



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### Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.d.i

Enter Reviewer Comment 11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, Pass & Ongoing N/A In Process community healthcare resources (including for primary and preventive services) and patient education. Enter Reviewer Comment 12. Develop a process for Medicaid recipients and project participants to 3/31/2017 3/31/2017 Pass & Complete Completed 0.125 report complaints and receive customer service. Enter Reviewer Comment 13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 PAM<sup>®</sup>. Enter Reviewer Comment 14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community In Process Pass & Ongoing N/A events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services and Enter Reviewer Comment 15. Inform and educate navigators about insurance options and Pass & Ongoing In Process N/A healthcare resources available to UI, NU, and LU populations. Enter Reviewer Comment 16. Ensure appropriate and timely access for navigators when attempting Pass & Ongoing In Process N/A to establish primary and preventive services for a community member. Enter Reviewer Comment



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### Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 2.d.i

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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. | 3/31/2017  | 3/31/2017 | Completed | Pass & Complete | 0.125 |
|-------|---|------------|-----------|-----------|-----------------|-------|
|       | Enter Revie   | wer Commer | it        |           |                 |       |
| Total |   |            |           |           |                 | 1.00  |

|            | Domain 2 Pay for Performance and Pay for Reporting - Project 2.d.i (all Milestones are P4R in DY2) |                 |                |  |  |  |  |  |
|------------|--|-----------------|----------------|--|--|--|--|--|
| AV Driving | Measure  | Reviewer Status | AVs<br>Awarded |  |  |  |  |  |
|            | C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information                 | Pass & Ongoing  | 0.25           |  |  |  |  |  |
|            | Enter Reviewer Comment   |                 |                |  |  |  |  |  |
|            | C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)                       | Pass & Ongoing  | 0.25           |  |  |  |  |  |
|            | Enter Reviewer Comment   |                 |                |  |  |  |  |  |
|            | C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients          | Pass & Ongoing  | 0.25           |  |  |  |  |  |
|            | Enter Reviewer Comment   |                 |                |  |  |  |  |  |
|            | C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff                    | Pass & Ongoing  | 0.25           |  |  |  |  |  |
|            | Enter Reviewer Comment   |                 |                |  |  |  |  |  |
|            | ED use by uninsured  | Pass & Ongoing  | 1              |  |  |  |  |  |
|            | Enter Reviewer Comment   |                 |                |  |  |  |  |  |

| NY ST      | EW<br>DRK<br>TATE<br>of Health   |   | New York State Departme<br>n Incentive Payment (DSF |   |  |  |  |
|------------|--|---|---|---|--|--|--|
|            | Save & Return       Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Que New York City Health and Hospitals Corporations - Project         Print       New York City Health and Hospitals Corporations - Project |   |   |   |  |  |  |
|            | PAM Level  |   | Pass & Ongoing                                      | 1 |  |  |  |
|            |  | Enter Reviewer Comment  |   |   |  |  |  |
|            |  | eventive care services Percent of attributed Medicaid members with no claims history for<br>entive services in measurement year compared to same in baseline year | Pass & Ongoing                                      | 1 |  |  |  |
|            | Enter Reviewer Comment   |   |   |   |  |  |  |
| Total 4.00 |  |   |   |   |  |  |  |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.a.i

| Project Snapshot |  | Payment Snapshot         |                  |
|------------------|--|--------------------------|------------------|
| Project Domain   | Clinical Improvement Projects (Domain 3)                   | DY2 Q4 Payment Available | \$<br>13,803,349 |
| Project ID       | 3.a.i  | DY2 Q4 Payment Earned    | \$<br>10,617,961 |
| Project Title    | Integration of primary care and behavioral health services |                          |                  |

|          |  |                          | 3.a.i Scores     | heet               |                  |                              |                                  |                              |                               |
|----------|--|--------------------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Domain Component   |                          | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational                                  | Complete                 | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |
| Domain 1 | Project Implementation Speed<br>Patient Engagement Speed | Complete                 | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | 6,370,776                    | 6,370,776                     |
|          |  | Patient Engagement Speed | Complete         | 1.00               | 1.00             | 100%                         |                                  |                              |                               |
|          | Domain 1 Subtotal  |                          | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 6,370,776                    | 6,370,776                     |
| Domain 3 | Domain 3 Pay for Reporting (P4R)                         | Complete                 | 2.00             | 2.00               | 100%             | 9.9%                         | 4.9%                             | 1,061,796                    | 1,061,796                     |
| Domain 5 | Domain 3 Pay for Performance Complete                    |                          | 8.00             | 4.00               | 50%              | 30.1%                        | 30.1%                            | 6,370,776                    | 3,185,388                     |
|          | Domain 3 Subtotal  |                          | 10.00            | 6.00               | 60%              | 40%                          | 35%                              | 7,432,573                    | 4,247,184                     |
|          | Total  | Complete                 | 17.00            | 13.00              | 76%              | 100%                         | 65%                              | 13,803,349                   | 10,617,961                    |

Total Project 3.a.i AVs Awarded: 13 out of 17

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



Print Enter Reviewer Comment Module 2 - Project Implementation Speed N/A Pass & Ongoing Ongoing In Process 1.00 Enter Reviewer Comment Module 3 - Patient Engagement Speed Pass & Ongoing Ongoing N/A In Process 1 Enter Reviewer Comment Total 1

|               | Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3 |  |                      |                       |                     |                 |                |  |
|---------------|--|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|
|               | ✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ✓ 3.a.i Model 3                          |  |                      |                       |                     |                 |                |  |
| Model         | AV<br>Driving  | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |
|               | •  | 1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3. |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |
|               |  | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |
|               |  | 2. Develop collaborative evidence-based standards of care including medication management and care engagement process.   | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.125          |  |
| 3.a.i Model 1 |  | Enter Reviewer Comment   |                      |                       |                     |                 | -              |  |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.a.i

YORK STATE Of Health Medicaid Redesign

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

#### New York City Health and Hospitals Corporations - Project 3.a.i Print 3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, Pass & Ongoing N/A In Process SBIRT) implemented for all patients to identify unmet needs. Enter Reviewer Comment 4. Use EHRs or other technical platforms to track all patients Pass & Complete 3/31/2017 3/31/2017 Completed 0.125 engaged in this project. Enter Reviewer Comment 5. Co-locate primary care services at behavioral health sites. In Process Pass & Ongoing N/A Enter Reviewer Comment 6. Develop collaborative evidence-based standards of care including medication management and care engagement 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 process. Enter Reviewer Comment 3.a.i Model 2 7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, In Process Pass & Ongoing N/A SBIRT) implemented for all patients to identify unmet needs. Enter Reviewer Comment 8. Use EHRs or other technical platforms to track all patients 3/31/2017 Pass & Complete 3/31/2017 Completed 0.125 engaged in this project. Enter Reviewer Comment 9. Implement IMPACT Model at Primary Care Sites. In Process Pass & Ongoing N/A

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

#### New York City Health and Hospitals Corporations - Project 3.a.i Print Enter Reviewer Comment 10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care Pass & Complete 3/31/2017 3/31/2017 Completed 0.125 standards and policies and procedures for care engagement. Enter Reviewer Comment 11. Employ a trained Depression Care Manager meeting 3/31/2017 3/31/2017 Pass & Complete Completed 0.125 requirements of the IMPACT model. Enter Reviewer Comment 12. Designate a Psychiatrist meeting requirements of the 3.a.i Model 3 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 IMPACT Model. Enter Reviewer Comment 13. Measure outcomes as required in the IMPACT Model. Pass & Ongoing In Process N/A Enter Reviewer Comment Pass & Ongoing 14. Provide "stepped care" as required by the IMPACT Model. In Process N/A Enter Reviewer Comment 15. Use EHRs or other technical platforms to track all patients 3/31/2017 3/31/2017 Completed Pass & Complete 0.125 engaged in this project. Enter Reviewer Comment 1.00 Total

Domain 3 Pay for Performance and Pay for Reporting



| Print      |  |                 |                |  |  |
|------------|--|-----------------|----------------|--|--|
| AV Driving | Measure  | Reviewer Status | AVs<br>Awarded |  |  |
|            | Adherence to Antipsychotic Medications for People with Schizophrenia                                       | Pass & Ongoing  | 1              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Antidepressant Medication Management - Effective Acute Phase Treatment                                     | Fail            | 0              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Antidepressant Medication Management - Effective Continuation Phase Treatment                              | Fail            | 0              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia                         | Pass & Ongoing  | 1              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Diabetes Monitoring for People with Diabetes and Schizophrenia   | Fail            | 0              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Pass & Ongoing  | 1              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |
|            | Follow-up after hospitalization for Mental Illness - within 30 days  | Fail            | 0              |  |  |
|            | P4P Measure DY2Q4  |                 |                |  |  |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.a.i

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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.a.i

| Follow-up after hospitalization for Mental Illness - within 7 days                                 | Fail           | 0    |  |  |
|--|----------------|------|--|--|
| P4P Measure DY2Q4  |                |      |  |  |
| Follow-up care for Children Prescribed ADHD Medications - Continuation Phase                       | Pass & Ongoing | 0.5  |  |  |
| P4R Measure DY2Q4  |                |      |  |  |
| Follow-up care for Children Prescribed ADHD Medications - Initiation Phase                         | Pass & Ongoing | 0.5  |  |  |
| P4R Measure DY2Q4  |                |      |  |  |
| Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) | Fail           | 0    |  |  |
| P4P Measure DY2Q4  |                |      |  |  |
| Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)                 | Fail           | 0    |  |  |
| P4P Measure DY2Q4  |                |      |  |  |
| Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) $\pm$          | Pass & Ongoing | 1    |  |  |
| P4P Measure DY2Q4  |                |      |  |  |
| Screening for Clinical Depression and follow-up  | Pass & Ongoing | 1    |  |  |
| P4R Measure DY2Q4  |                |      |  |  |
| Total  |                | 6.00 |  |  |



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|                       | Project Snapshot   |   | Payment Snapshot         |                  |
|-----------------------|--|---|--------------------------|------------------|
| <b>Project Domain</b> | Clinical Improvement Projects (Domain 3)   | [ | DY2 Q4 Payment Available | \$<br>10,492,217 |
| Project ID            | 3.b.i  |   | DY2 Q4 Payment Earned    | \$<br>10,492,217 |
| Project Title         | Evidence-based strategies for disease management in high risk/affected populations. (adult only) |   |                          |                  |

|          | 3.b.i Scoresheet                   |               |                  |                    |                  |                              |                                  |                              |                               |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             | 60%                          |                                  | 4,842,562                    | 4,842,562                     |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             |                              | 6 30%                            |                              |                               |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |                              |                               |
|          | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 4,842,562                    | 4,842,562                     |
| Domain 3 | Domain 3 Pay for Reporting (P4R)   | Complete      | 6.00             | 6.00               | 100%             | 9.9%                         | 4.9%                             | 807,094                      | 807,094                       |
| Domain 5 | Domain 3 Pay for Performance (P4P) | complete      | 1.00             | 1.00               | 100%             | 30.1%                        | 30.1%                            | 4,842,562                    | 4,842,562                     |
|          | Domain 2 Subtotal                  |               | 7.00             | 7.00               | 100%             | 40%                          | 35%                              | 5,649,656                    | 5,649,656                     |
|          | Total Complete                     |               | 14.00            | 14.00              | 100%             | 100%                         | 65%                              | 10,492,217                   | 10,492,217                    |

Total Project 3.b.i AVs Awarded: 14 out of 14

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

| Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) |
|---|
| New York City Health and Hospitals Corporations - Project 3.b.i                             |
|   |

|       | Enter Reviewer Comment                  |         |     |            |                |      |  |
|-------|---|---------|-----|------------|----------------|------|--|
|       | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1.00 |  |
|       | Enter Reviewer Comment                  |         |     |            |                |      |  |
|       | Module 3 - Patient Engagement Speed     | Ongoing | N/A | In Process | Pass & Ongoing | 1    |  |
|       | Enter Reviewer Comment                  |         |     |            |                |      |  |
| Total |   |         |     |            |                | 2.00 |  |

|            | Domain 1 Project Prescribed Milestones - Project 3.b.i   |                      |                       |                     |                 |                |  |  |  |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|--|
| AV Driving | Project Requirement and Metric/Deliverable   | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |  |  |  |
|            | <ol> <li>Implement program to improve management of cardiovascular<br/>disease using evidence-based strategies in the ambulatory and<br/>community care setting.</li> </ol>  |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |  |
|            | Enter Revie  | wer Commen           | nt                    |                     |                 |                |  |  |  |
| •          | 2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3. |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |  |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |  |  |  |
|            | 3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.   |                      |                       | In Process          | Pass & Ongoing  | N/A            |  |  |  |
|            | Enter Revie  | wer Commen           | nt                    |                     |                 |                |  |  |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.b.i

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| 4. Use EHRs or other technical platforms to track all patients engaged in this project.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |
|---|------------|-----------|------------|-----------------|------|--|
| Enter Revie   | wer Commen | t         |            |                 |      |  |
| 5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).   |            |           | In Process | Pass & Ongoing  | N/A  |  |
| Enter Revie   | wer Commen | it        |            |                 |      |  |
| 6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |
| Enter Revie   | wer Commen | it        |            |                 |      |  |
| 7. Develop care coordination teams including use of nursing staff,<br>pharmacists, dieticians and community health workers to address<br>lifestyle changes, medication adherence, health literacy issues, and<br>patient self-efficacy and confidence in self-management. | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |
| Enter Revie   | wer Commen | nt        |            |                 |      |  |
| 8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.   |            |           | In Process | Pass & Ongoing  | N/A  |  |
| Enter Reviewer Comment  |            |           |            |                 |      |  |
| 9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |
| Enter Revie   | wer Commen | t         |            |                 |      |  |
| 10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.  |            |           | In Process | Pass & Ongoing  | N/A  |  |
| Enter Revie   | wer Commen | ot        |            |                 |      |  |



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.b.i

| 11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |  |
|--|------------|-----------|------------|-----------------|------|--|--|
| Enter Revie  | wer Commen | t         |            |                 |      |  |  |
| 12. Document patient driven self-management goals in the medical record and review with patients at each visit.                              |            |           | In Process | Pass & Ongoing  | N/A  |  |  |
| Enter Revie  | wer Commen | t         |            |                 |      |  |  |
| 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.                 |            |           | In Process | Pass & Ongoing  | N/A  |  |  |
| Enter Revie  | wer Commen | t         |            |                 |      |  |  |
| 14. Develop and implement protocols for home blood pressure monitoring with follow up support.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |
| 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.                             | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |
| 16. Facilitate referrals to NYS Smoker's Quitline.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Complete | 0.10 |  |  |
| Enter Revie  | wer Commen | t         |            |                 |      |  |  |
| 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk |            |           | In Process | Pass & Ongoing  | N/A  |  |  |
| Enter Reviewer Comment   |            |           |            |                 |      |  |  |
| 18. Adopt strategies from the Million Hearts Campaign.   | 3/31/2017  | 3/31/2017 | Completed  | Pass & Ongoing  | 0.10 |  |  |
|  |            |           |            |                 |      |  |  |



0.10

1.00

| Save & Return                | Achievement Value (Å  | -          |              | •             | - March 31, 2017 (Payme  |               |
|------------------------------|---|------------|--------------|---------------|--------------------------|---------------|
| Print                        | 1   |            | New York Cit | ty Health and | Hospitals Corporations - | Project 3.b.i |
|                              | Enter Revie   | wer Commer | t            |               |                          |               |
|                              | the Medicaid Managed Care organizations tion to coordinate services under this project. |            |              | In Process    | Pass & Ongoing           | N/A           |
|                              | Enter Revie   | wer Commer | it           |               |                          |               |
| 20. Engage a majority (at le | ast 80%) of primary care providers in this  |            |              |               |                          |               |

20. Engage a majority (at least 80%) of primary care providers in this 3/31/2017 3/31/2017 Completed Pass & Ongoing project. Enter Reviewer Comment Total

|            | Domain 3 Pay for Performance and Pay for Reporting |                 |                |  |  |  |  |
|------------|--|-----------------|----------------|--|--|--|--|
| AV Driving | Measure  | Reviewer Status | AVs<br>Awarded |  |  |  |  |
|            | Aspirin Use  | Pass & Ongoing  | 0.5            |  |  |  |  |
|            | P4R Measure D2Q4                                   |                 |                |  |  |  |  |
|            | Discussion of Risks and Benefits of Aspirin Use    | Pass & Ongoing  | 0.5            |  |  |  |  |
|            | P4R Measure D2Q4                                   |                 |                |  |  |  |  |
|            | Controlling High Blood Pressure                    | Pass & Ongoing  | 1              |  |  |  |  |
|            | P4R Measure D2Q4                                   |                 |                |  |  |  |  |
|            | Flu Shots for Adults Ages 18 – 64                  | Pass & Ongoing  | 1              |  |  |  |  |
|            | P4R Measure D2Q4                                   |                 |                |  |  |  |  |

NEW YORK STATE Department of Health Medicaid Redesign Team



New York City Health and Hospitals Corporations - Project 3.b.i

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

| Print  |                | -         |
|--|----------------|-----------|
| Health Literacy (QHL13, 14, and 16)  | Pass & Ongoing | 1         |
| P4R Measure D2Q4   |                |           |
| Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit                | Pass & Ongoing | 0.3333333 |
| P4R Measure D2Q4   |                |           |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 |
| P4R Measure D2Q4   |                |           |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 |
| P4R Measure D2Q4   |                |           |
| Prevention Quality Indicator # 8 (Heart Failure) ±   | Pass & Ongoing | 1         |
| P4R Measure D2Q4   |                |           |
| Prevention Quality Indicator # 7 (HTN) ±   | Pass & Ongoing | 1         |
| P4P Measure DY2Q4  |                |           |
| Total  |                | 7.00      |



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NEW YORK STATE Department of Health Medicaid Redesign Team



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.d.ii

|                       | Project Snapshot   |     | Payment Snapshot         |                  |
|-----------------------|--|-----|--------------------------|------------------|
| <b>Project Domain</b> | Clinical Improvement Projects (Domain 3)                   | 1 [ | DY2 Q4 Payment Available | \$<br>10,812,086 |
| Project ID            | 3.d.ii   |     | DY2 Q4 Payment Earned    | \$<br>9,956,624  |
| Project Title         | Expansion of asthma home-based self-<br>management program |     |                          |                  |

|          |                                    | 3.d.ii Scores | heet             |                    |                  |                              |                                  |                              |                               |           |           |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|-----------|-----------|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |           |           |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |           |           |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 0.80               | 80%              | 60%                          | 60%                              | 60%                          | 30%                           | 4,990,193 | 4,134,732 |
|          | Patient Engagement Speed           | Complete      | 1.00             | 0.00               | 0%               |                              |                                  |                              |                               |           |           |
|          | Domain 1 Subtotal                  |               | 7.00             | 5.80               | 83%              | 60%                          | 30%                              | 4,990,193                    | 4,134,732                     |           |           |
| Domain 3 | Domain 3 Pay for Reporting (P4R)   | Complete      | 4.00             | 4.00               | 100%             | 9.9%                         | 4.9%                             | 831,699                      | 831,699                       |           |           |
| Domain 5 | Domain 3 Pay for Performance (P4P) | complete      | 4.00             | 4.00               | 100%             | 30.1%                        | 30.1%                            | 4,990,193                    | 4,990,193                     |           |           |
|          | Domain 3 Subtotal                  |               | 8.00             | 8.00               | 100%             | 40%                          | 35%                              | 5,821,892                    | 5,821,892                     |           |           |
|          | Total                              | Complete      | 15.00            | 13.80              | 92%              | 100%                         | 65%                              | 10,812,086                   | 9,956,624                     |           |           |

Total Project 3.d.ii AVs Awarded: 13.8 out of 15

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

Fail

0

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

In Process

**New York City Health and Hospitals Corporations - Project 3.d.ii** Print Enter Reviewer Comment Module 2 - Project Implementation Speed 3/31/2017 3/31/2017 Completed Pass & Ongoing 0.80

Enter Reviewer Comment

Ongoing

N/A

| Total      |  |                      |                       |                     | 0.80            |                |
|------------|--|----------------------|-----------------------|---------------------|-----------------|----------------|
|            | Domain 1 Project Prescribed M  | lilestones - Pr      | roiect 3.d.ii         |                     |                 |                |
| AV Driving |  | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |
|            | 1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.   |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |
|            | <ol> <li>Establish procedures to provide, coordinate, or link the client to<br/>resources for evidence-based trigger reduction interventions.</li> <li>Specifically, change the patient's indoor environment to reduce exposure</li> </ol> | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.20           |
|            |  | wer Commen           | t                     |                     |                 |                |
|            | 3. Develop and implement evidence-based asthma management guidelines.  | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.20           |
|            | Enter Reviewer Comment   |                      |                       |                     |                 |                |

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NEW YORK STATE Medicaid Redesign Team Department of Health

Module 3 - Patient Engagement Speed



|   | Save & Return Achievement Value (A  | •           |           |            | - March 31, 2017 (Payme<br>Hospitals Corporations - I |      |
|---|---|-------------|-----------|------------|---|------|
| • | 4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans. | 3/31/2017   | 3/31/2017 | Completed  | Pass & Complete                                       | 0.20 |
|   | Enter Revie   | ewer Commer | nt        |            |   |      |
|   | 5. Ensure coordinated care for asthma patients includes social services and support.  |             |           | In Process | Pass & Ongoing  | N/A  |
|   | Enter Reviewer Comment  |             |           |            |   |      |
|   | 6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.   | 3/31/2017   | 3/31/2017 | Completed  | Fail  | 0.00 |
|   | Enter Revie   | ewer Commer | nt        |            |   |      |
|   | 7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.   |             |           | In Process | Pass & Ongoing  | N/A  |
|   | Enter Revie   | ewer Commer | nt        |            |   |      |
|   | 8. Use EHRs or other technical platforms to track all patients engaged in this project.   | 3/31/2017   | 3/31/2017 | Completed  | Pass & Complete                                       | 0.20 |
|   | Enter Revie   | ewer Commer | nt        |            |   |      |
|   | Total   |             |           |            |   | 0.80 |

|                    | Domain 3 Pay for Performance and Pay for Reporting |                 |                |
|--------------------|--|-----------------|----------------|
| AV <b>Dri</b> ving | Measure  | Reviewer Status | AVs<br>Awarded |

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

# Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.d.ii Asthma Medication Ratio (5 – 64 Years) Pass & Ongoing 1

| P4P Measure DY2Q4   |                |     |
|---|----------------|-----|
| Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered | Pass & Ongoing | 0.5 |
| P4P Measure DY2Q4   |                |     |
| Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered | Pass & Ongoing | 0.5 |
| P4P Measure DY2Q4   |                |     |
| Pediatric Quality Indicator #14 Pediatric Asthma ±  | Pass & Ongoing | 1   |
| P4P Measure DY2Q4   |                |     |
| Prevention Quality Indicator # 15 Younger Adult Asthma ±                                    | Pass & Ongoing | 1   |
| P4P Measure DY2Q4   |                |     |
| Asthma Medication Ratio (5 – 64 Years)  | Pass & Ongoing | 1   |
| P4R Measure DY2Q4   |                |     |
|   |                |     |



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Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.g.i

|                | Project Snapshot                                   |       | Payment Snapshot     |                 |
|----------------|--|-------|----------------------|-----------------|
| Project Domain | Clinical Improvement Projects (Domain 3)           | DY2   | Q4 Payment Available | \$<br>6,095,182 |
| Project ID     | 3.g.i  | DY2 C | 4 Payment Earned     | \$<br>6,095,182 |
| Project Title  | Integration of palliative care into the PCMH model |       |                      |                 |

|          | 3.g.i Scoresheet                   |               |                  |                    |                  |                              |                                  |  |                               |  |  |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|--|-------------------------------|--|--|
| Domain   | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$)                             | Net<br>Payment<br>Earned (\$) |  |  |
|          | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |  |                               |  |  |
| Domain 1 | Project Implementation Speed       | Complete      | 1.00             | 1.00               | 100%             | 60%                          | 30%                              | Available  | 3,657,109                     |  |  |
|          | Patient Engagement Speed           | Complete      | 1.00             | 1.00               | 100%             |                              |                                  |  |                               |  |  |
|          | Domain 1 Subtotal                  |               | 7.00             | 7.00               | 100%             | 60%                          | 30%                              | 3,657,109  | 3,657,109                     |  |  |
| Domain 3 | Domain 3 Pay for Reporting (P4R)   | Complete      | 5.00             | 5.00               | 100%             | 40%                          | 35%                              | 2 128 072  | 2,438,073                     |  |  |
| Domain 5 | Domain 3 Pay for Performance (P4P) | N/A           | N,               | /A                 | 10078            | 4076                         | 5578                             | Available<br>(\$)<br>3,657,109<br>2,438,073<br>2,438,073 | 2,430,073                     |  |  |
|          | Domain 3 Subtotal                  |               | 5.00             | 5.00               | 100%             | 40%                          | 35%                              | 2,438,073  | 2,438,073                     |  |  |
|          | Total                              | Complete      | 12.00            | 12.00              | 100%             | 100%                         | 65%                              | 6,095,182  | 6,095,182                     |  |  |

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

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



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

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

| Print                                   |               | New York Ci | ty Health and | Hospitals Corporations - | Project 3.g.i |
|---|---------------|-------------|---------------|--------------------------|---------------|
| Enter Rev                               | viewer Commer | nt          |               |                          |               |
| Module 2 - Project Implementation Speed | 3/17/2017     | N/A         | Completed     | Pass & Ongoing           | 1.00          |
| Enter Rev                               | viewer Commer | nt          |               |                          |               |
| Module 3 - Patient Engagement Speed     | Ongoing       | N/A         | In Process    | Pass & Ongoing           | 1             |
| Enter Rev                               | viewer Commer | nt          |               | Pass & Ongoing           |               |
| Total                                   |               |             |               |                          | 2.00          |

|            | Domain 1 Project Prescribed N   | lilestones - P       | roject 3.g.i          |                     |                 |                |
|------------|---|----------------------|-----------------------|---------------------|-----------------|----------------|
| AV Driving | Project Requirement and Metric/Deliverable  | Required<br>Due Date | Committed<br>Due Date | Milestone<br>Status | Reviewer Status | AVs<br>Awarded |
|            | 1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification. |                      |                       | In Process          | Pass & Ongoing  | N/A            |
|            |   |                      |                       |                     |                 |                |
|            | 2. Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.25           |
|            |   |                      |                       |                     |                 |                |
|            | <ol><li>Develop and adopt clinical guidelines agreed to by all partners<br/>including services and eligibility.</li></ol>               | 3/31/2017            | 3/31/2017             | Completed           | Pass & Complete | 0.25           |
|            |   |                      |                       |                     |                 |                |
|            | 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             | Completed           | Pass & Complete | 0.25           |
|            |   |                      |                       |                     |                 |                |

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Department of Health Medicaid Redesign Team

NEW YORK STATE



| Save & Return |
|---------------|
|               |
| Print         |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 3.g.i

|  | 5. Engage with Medicaid Managed Care to address coverage of services.            |           |           | 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 | Completed  | Pass & Complete | 0.25 |  |  |  |  |
|  |  |           |           |            |                 |      |  |  |  |  |
|  | Total  |           |           |            |                 |      |  |  |  |  |

|            | Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i (all Milestones are P4R in DY2) |                        |                |  |  |  |  |  |  |
|------------|--|------------------------|----------------|--|--|--|--|--|--|
| AV Driving | Measure  | <b>Reviewer Status</b> | AVs<br>Awarded |  |  |  |  |  |  |
|            | Percentage of members who remained stable or demonstrated improvement in pain                      | Pass & Ongoing         | 1              |  |  |  |  |  |  |
|            |  |                        |                |  |  |  |  |  |  |
|            | Advanced Directives – Talked about Appointing for Health Decisions                                 | Pass & Ongoing         | 1              |  |  |  |  |  |  |
|            |  |                        |                |  |  |  |  |  |  |
|            | Percentage of members whose pain was not controlled ±  | Pass & Ongoing         | 1              |  |  |  |  |  |  |
|            |  |                        |                |  |  |  |  |  |  |
|            | Depressive feelings - percentage of members who experienced some depression feeling $\pm$          | Pass & Ongoing         | 1              |  |  |  |  |  |  |
|            |  |                        |                |  |  |  |  |  |  |
|            | Percentage of members who had severe or more intense daily pain $\pm$                              | Pass & Ongoing         | 1              |  |  |  |  |  |  |
|            |  |                        |                |  |  |  |  |  |  |

| YO<br>ST | Department<br>of Health | Medicaid<br>Redesign Team | New York State Department of He<br>Delivery System Reform Incentive Payment (DSRIP) Prog |       |
|----------|-------------------------|---------------------------|--|-------|
|          | Save & Return           |                           | Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quar  | •     |
|          | Print                   |                           | New York City Health and Hospitals Corporations - Project                                | 3.g.i |
|          |                         |                           |  |       |
|          |                         |                           |  |       |
|          |                         |                           | Total 5.0  | D     |



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Iew York City Health and Hospitals Corporations - Project 4.a.iii

|                | Project Snapshot  |   |           |
|----------------|---|---|-----------|
| Project Domain | Domain 4: Population-wide Projects: New York's                                |   | DY2 Q4 P  |
| Project ID     | 4.a.iii   | 0 | OY2 Q4 Pa |
| Project Title  | Strengthen Mental Health and Substance Abuse<br>Infrastructure Across Systems |   |           |

| Payment Snaps            | hot |           |
|--------------------------|-----|-----------|
| DY2 Q4 Payment Available | \$  | 5,657,811 |
| DY2 Q4 Payment Earned    | \$  | 5,657,811 |

|          | 4.a.iii Scoresheet                 |  |                  |                    |                  |                              |                                  |                              |                               |  |  |
|----------|------------------------------------|--|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|
| Domain   | Component                          | Review Status  | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |  |  |
|          | Domain 1 Organizational            | Complete   | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |  |  |
| Domain 1 | Project Implementation Speed       | N/A  | 0.00             | 0.00               | 0%               | 60%                          | 30%                              | Available                    | 3,394,687                     |  |  |
|          | Patient Engagement Speed           | N/A  | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |  |  |
|          | Domain 1 Subtotal                  |  | 5.00             | 5.00               | 100%             | 60%                          | 30%                              | 3,394,687                    | 3,394,687                     |  |  |
| Domain 4 | Domain 4 Pay for Reporting (P4R)   | Complete   | 11.00            | 11.00              | 100%             | 40%                          | 20%                              | 2,263,124                    | 2,263,124                     |  |  |
| Domain 4 | Domain 4 Pay for Performance (P4P) | N/A  | N/A              | N/A                | N/A              | 0%                           | 0%                               | 2,263,124                    | -                             |  |  |
|          | Domain 4 Subtotal                  | Domain 4 Subtotal         11.00         11.00         100%         40%         20% |                  |                    | 20%              | 2,263,124                    | 2,263,124                        |                              |                               |  |  |
|          | Total                              | Complete   | 16.00            | 16.00              | 100%             | 100%                         | 50%                              | 5,657,811                    | 5,657,811                     |  |  |

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

|                    | Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY2) |  |                 |                |  |  |  |
|--------------------|--|--|-----------------|----------------|--|--|--|
| AV Driving Measure |  | Measure  | Reviewer Status | AVs<br>Awarded |  |  |  |
|                    |  | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-<br>Hispanics | Pass & Ongoing  | 1              |  |  |  |



|  | Print New York City Health and Hospitals Corporations - Project 4.a.i                                     |                |   |  |  |  |
|--|---|----------------|---|--|--|--|
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Age-adjusted suicide death rate per 100,000   | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Percentage of adults with health insurance - Aged 18- 64 years  | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Percentage of premature death (before age 65 years)   | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics           | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Age-adjusted percentage of adult binge drinking during the past month                                     | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |
|  | Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years                | Pass & Ongoing | 1 |  |  |  |
|  | Enter Reviewer Comment  |                |   |  |  |  |

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)

Save & Return



| Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - Mar<br>lew York City Health and Hospit |   |  |                | - |  |  |
|---|---|--|----------------|---|--|--|
|   | Print   |  |                |   |  |  |
|   | Age-adjusted percentage of                        | adults with poor mental health for 14 or more days in the last month               | Pass & Ongoing | 1 |  |  |
|   |   | Enter Reviewer Comment   |                |   |  |  |
|   | Age-adjusted preventable h                        | ospitalizations rate per 10,000 - Aged 18+ years                                   | Pass & Ongoing | 1 |  |  |
|   |   | Enter Reviewer Comment   |                |   |  |  |
| •   | Age-adjusted preventable h<br>White non-Hispanics | ospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to | Pass & Ongoing | 1 |  |  |
|   |   | Enter Reviewer Comment   |                |   |  |  |
|   | Total 11.00                                       |  |                |   |  |  |



Save & Return Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) New York City Health and Hospitals Corporations - Project 4.c.ii

| Project Snapshot |  |   | Payment Snapshot         |    |           |  |  |
|------------------|--|---|--------------------------|----|-----------|--|--|
| Project Domain   | Domain 4: Population-wide Projects: New York's       | 1 | DY2 Q4 Payment Available | \$ | 5,374,921 |  |  |
| Project ID       | 4.c.ii   | 1 | DY2 Q4 Payment Earned    | \$ | 5,374,921 |  |  |
| Project Title    | Increase early access to, and retention in, HIV care |   |                          |    |           |  |  |

|                | 4.c.ii Scoresheet                  |               |                  |                    |                  |                              |                                  |                              |                               |
|----------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain         | Component                          | Review Status | AVs<br>Available | Net AVs<br>Awarded | Percentage<br>AV | Domain<br>Funding %<br>(DY2) | Domain<br>Funding %<br>(DY2, Q4) | Payment<br>Available<br>(\$) | Net<br>Payment<br>Earned (\$) |
|                | Domain 1 Organizational            | Complete      | 5.00             | 5.00               | 100%             |                              |                                  |                              |                               |
| Domain 1       | Project Implementation Speed       | N/A           | 0.00             | 0.00               | 0%               | 60%                          | 30%                              | 3,224,952                    | 3,224,952                     |
|                | Patient Engagement Speed           | N/A           | 0.00             | 0.00               | 0%               |                              |                                  |                              |                               |
|                | Domain 1 Subtotal                  |               | 5.00             | 5.00               | 100%             | 60%                          | 30%                              | 3,224,952                    | 3,224,952                     |
| Domain 4       | Domain 4 Pay for Reporting (P4R)   | Complete      | 11.00            | 11.00              | 100%             | 40%                          | 20%                              | 2,149,968                    | 2,149,968                     |
| Domain 4       | Domain 4 Pay for Performance (P4P) | N/A           | N/A              | N/A                | N/A              | 0%                           | 0%                               | -                            | -                             |
|                | Domain 4 Subtotal                  |               | 11.00            | 11.00              | 100%             | 40%                          | 20%                              | 2,149,968                    | 2,149,968                     |
| Total Complete |                                    | 16.00         | 16.00            | 100%               | 100%             | 50%                          | 5,374,921                        | 5,374,921                    |                               |

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

|   | Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (all Milestones are P4R in DY2) |  |                 |                |  |  |  |
|---|---|--|-----------------|----------------|--|--|--|
| 1 | AV Driving  | Measure  | Reviewer Status | AVs<br>Awarded |  |  |  |
|   |   | Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-<br>Hispanics | Pass & Ongoing  | 1              |  |  |  |



| Save & Return                         | 7 - March 31, 2017 (Payme  |                |   |  |  |  |
|---------------------------------------|--|----------------|---|--|--|--|
| Print                                 | l Hospitals Corporations - I   | Project 4.c.ii |   |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Newly diagnosed HIV case rate per 10  | 00,000   | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Newly diagnosed HIV case rate per 10  | 0,000—Difference in rates (Black and White) of new HIV diagnoses       | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Newly diagnosed HIV case rate per 10  | 0,000—Difference in rates (Hispanic and White) of new HIV diagnoses    | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Percentage of adults with health insu | rance - Aged 18- 64 years  | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Percentage of premature death (befo   | re age 65 years)   | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Percentage of premature death (befo   | re age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |
| Percentage of premature death (befo   | re age 65 years) – Ratio of Hispanics to White non-Hispanics           | Pass & Ongoing | 1 |  |  |  |
|                                       | Enter Reviewer Comment   |                |   |  |  |  |



|   | Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment C<br>New York City Health and Hospitals Corporations - Pro |  |                            |                |  |  |
|---|---|--|----------------------------|----------------|--|--|
|   | Print   | New York City Health and   | Hospitals Corporations - I | Project 4.c.ii |  |  |
|   | Age-adjusted percentage of  | adults who have a regular health care provider - Aged 18+ years                    | Pass & Ongoing             | 1              |  |  |
|   |   | Enter Reviewer Comment   |                            |                |  |  |
|   | Age-adjusted preventable h  | ospitalizations rate per 10,000 - Aged 18+ years                                   | Pass & Ongoing             | 1              |  |  |
|   |   | Enter Reviewer Comment   |                            |                |  |  |
| • | Age-adjusted preventable h<br>White non-Hispanics   | ospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to | Pass & Ongoing             | 1              |  |  |
|   |   | Enter Reviewer Comment   |                            |                |  |  |
|   |   | Total  |                            | 11.00          |  |  |