

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

General Instructions										
Step	Description/Link	Image								
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	SECURITY WARNING Macros have been disabled. Enable Content								
2. Review AV Scorecard Overview	The AV scorecard Overview is a summary of the report	Click to Access AV Scorecard Overview								

	Functionality									
Step	Description/Link	Image								
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All								
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Like (rick on the purple fink below to access each Individual project report) Domain (= Organizational (All Projects) AV Adjustments (Column f) 2 + a 2 + a								
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments								



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

PPS Information					
Quarter	DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter)				
PPS	Staten Island Performing Provider System, LLC				
PPS Number	43				

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 Adjustment	Net AVs Awarded	DY2 Q4 Payment Available	DY2 Q4 Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment				
2.a.iii	22.00	20.50	0.00	20.50	\$ 2,338,865	\$ 2,038,154				
2.b.iv	21.00	21.00	0.00	21.00	\$ 2,226,359	\$ 2,226,359				
2.b.vii	22.00	22.00	0.00	22.00	\$ 2,071,592	\$ 2,071,592				
2.b.viii	21.00	21.00	0.00	21.00	\$ 2,307,626	\$ 2,307,626				
2.d.i	11.00	10.94	0.00	10.94	\$ 1,979,209	\$ 1,969,230				
3.a.i	17.00	12.50	0.00	12.50	\$ 2,571,952	\$ 1,978,425				
3.a.iv	17.00	12.50	0.00	12.50	\$ 2,461,713	\$ 1,893,626				
3.c.i	13.00	12.00	0.00	12.00	\$ 2,032,206	\$ 1,094,265				
3.g.ii	7.00	12.00	0.00	12.00	\$ 1,357,629	\$ 1,357,629				

Print Summary Print All

NEW YORK STATE Of Health Medicaid Redesign Team			Delivery			-	ment of Health DSRIP) Program
Print Summary Print All				Staten Is			(AV) Scorecard der System, LLC
4.a.iii	16.00	16.00	0.00	16.00	\$ 1,108,369	\$	1,108,369
4.b.ii	21.00	21.00	0.00	21.00	\$ 942,114	\$	942,114
AV Adjustments (Column F)							
Total	188.00	181.44	0.00	181.44	\$ 21,397,635	\$	18,987,388



Print

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 Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

			Workforce S	Strategy			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Workforce Strategy Budget Updates		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete	



S	Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, Staten Island Performing Provider System, LLC - Domain 1 Orge					
	Print		2	staten Island Pe	erforming Provid	ler System, LLC - Domain 1 Orge
			1	1	1	
		 Define target workforce state (in line with DSRIP program's goals) 	N/A	N/A	In Process	Pass & Ongoing
		2. Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing
Additional Workforce		3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing
Strategy Budget						·
Updates (non AV- driving)		4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as	6/30/2016	N/A	Completed	Pass & Complete
		new hires, particularly focusing on full and partial placements				
		5. Develop training strategy	3/31/2016	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



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

	Print		Staten Island Performing Provider System, LLC - Domain 1 Orgar					
	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		
Additional Workforce	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
Strategy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
			Total				1	

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



S	ave	& R	eturn	
	F	Prin	t	

		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing			
Quarterly Project									
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete			
Budget and Flow of									
Funds		Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing			
		Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing			
	Total								

			Section 02 - G	overnance			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize governance structure and sub- committee structure	9/30/2015	N/A	Completed	Pass & Complete	
		2. Establish a clinical governance					
Governance		structure, including clinical quality	12/31/2016	N/A	Completed	Pass & Complete	
Structure		committees for each DSRIP project					



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



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

Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

Print 9. Inclusion of CBOs in PPS Pass & Ongoing N/A N/A In Process Implementation Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A Pass & Ongoing In Process Workstreams Roles and Responsibilities N/A N/A Pass & Ongoing In Process Additional Governance N/A Key Stakeholders N/A Topic Areas N/A Pass & Ongoing In Process IT Expectations N/A N/A Pass & Ongoing In Process Pass & Ongoing N/A N/A Progress Reporting In Process Total 1

Section 03 - Financial Sustainability



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	
	•	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
Financial							
Stability Update		 Finalize Compliance Plan consistent with New York State Social Services Law 363-d 	12/31/2015	N/A	Completed	Pass & Complete	1
		4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	

1

Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs Print

Section 04 - Cultural Competency & Health Literacy AV **Required Due** Committed Due Milestone Process Milestone **Reviewer Status** AV Awarded Driving Measure Date Status Date 1. Finalize cultural competency / health Pass & Complete 12/31/2015 N/A Completed literacy strategy. Cultural Competency 2. Develop a training strategy focused on 1 /Health addressing the drivers of health disparities 6/30/2016 N/A Pass & Complete Completed (beyond the availability of language-Literacy appropriate material).

		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial							N/A
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
	•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			-		-		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	

Total



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

Print Major Risks to Implementation & Risk N/A Pass & Ongoing N/A In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A Pass & Ongoing In Process Workstreams Roles and Responsibilities N/A N/A Pass & Ongoing In Process Additional Cultural Competency N/A /Health N/A Key Stakeholders N/A Pass & Ongoing In Process Literacy Topic Areas IT Expectations N/A N/A Pass & Ongoing In Process Progress Reporting N/A N/A Pass & Ongoing In Process Total 1

Section 05 - IT Systems and Processes								
Process Measure	Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	



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

	Print		9	Staten Island Pe	erforming Provid	ler System, LLC - Domain 1 Orga	nizational AVs
		1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	9/30/2015	N/A	Complete	Pass & Complete	
		2. Develop an IT Change Management Strategy.	3/31/2016	N/A	Complete	Pass & Complete	
IT Systems							
IT Systems and Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2015	N/A	Complete	Pass & Complete	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2015	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	12/31/2015	N/A	Complete	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



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

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Additional IT Systems and Processes Topic Areas	-					
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
	•	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing
	-	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
			Total			

Section 06 - Performance Reporting										
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
		 Establish reporting structure for PPS- wide performance reporting and communication. 	12/31/2015	N/A	Complete	Pass & Complete	N/A			
Performanc e Reporting	•	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2016	N/A	Complete	Pass & Complete	N/A			



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

Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs Major Risks to Implementation & Risk Pass & Ongoing N/A N/A In Process Mitigation Strategies

		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
					-		
	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc							N/
e Reporting Fopic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	147
	•						
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

Section 07 - Practitioner Engagement									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		1. Develop Practitioners communication and engagement plan.	12/31/2015	N/A	Complete	Pass & Complete			

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Print

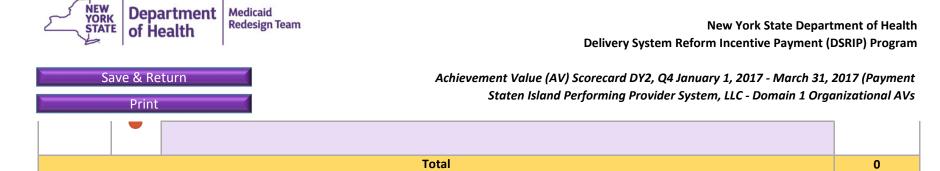


Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment

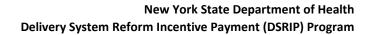
Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

Print 2. Develop training / education plan Practitioner N/A targeting practioners and other Engagement Pass & Complete professional groups, designed to educate 3/31/2016 N/A Complete 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 Pass & Ongoing **IT Expectations** N/A In Process Pass & Ongoing Progress Reporting N/A N/A In Process

Save & Return



		Section	08 - Population I	Health Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarde
		 Develop population health management roadmap. 	6/30/2016	N/A	Complete	Pass & Complete	N/A
Population							
Health		2. Finalize PPS-wide bed reduction plan.	3/31/2016	N/A	Complete	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Population							N/A
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	



 IT Expectations
 N/A
 N/A
 In Process
 Pass & Ongoing

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

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Section 09 - Clinical Integration AV **Required Due** Committed Due Process Milestone Milestone **Reviewer Status** AV Awarded Driving Date Status Measure Date 1. Perform a clinical integration 'needs 12/31/2015 N/A Completed Pass & Complete assessment'. N/A Clinical Integration 2. Develop a Clinical Integration strategy. 3/31/2016 N/A Completed Pass & Complete N/A Major Risks to Implementation & Risk N/A Pass & Ongoing N/A In Process Mitigation Strategies Major Dependencies on Organizational Pass & Ongoing N/A N/A In Process Workstreams Roles and Responsibilities N/A N/A In Process Pass & Ongoing



Save & Return Print



Sa	ave & Re	turn				24 January 1, 2017 - March 31, 2	
	Print		5	Staten Island Pe	rforming Provid	er System, LLC - Domain 1 Orga	nizational AVs
Additional Clinical Integration Topic Areas	-						N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC AV Adjustn

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AVs Awarded		Adjusted	Net AVs Awarded	
Adjustment	Project Projects	Available	Net	Percentage	AUJUSTEU	Net	Percentage AV	
	Project	Selected	Awarded	AV	AVS	Awarded	reitentage 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	133.00	126.44	95%	0.00	126.44	95%
Total			188.00	181.44	97%	0.00	181.44	97%

Hide Reviewer Comments

Organizational

Project Adjustments

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



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.a.iii

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

Payment Snapsh	ot	
DY2 Q4 Payment Available	\$	2,338,865
DY2 Q4 Payment Earned	\$	2,038,154

	2.a.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,403,319	1,102,608
Domain 1	Project Implementation Speed	Complete	1.00	0.50	50%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		7.00	5.50	79%	60%	30%	1,403,319	1,102,608
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	935,546	935,546
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%	935,546	935,546
	Total	Complete	22.00	20.50	93%	100%	50%	2,338,865	2,038,154

Total Project 2.a.iii AVs Awarded: 20.5 out of 22

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 3 Staten Island Performing Provider	, , , , ,

Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0.50		
Enter Reviewer Comment							
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Fail	0		
Enter Reviewer Comment							
Total 0.50							

	Domain 1 Project Prescribed Milestones - Project 2.a.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.		3/31/2017	Completed	Pass & Complete	0.25		
	Enter Reviewer Comment							
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.			In Process	Pass & Ongoing	N/A		
	Enter Reviewer Comment							
	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.			In Process	Pass & Ongoing	N/A		

NEW YORK STATE Department of Health Medicaid Redesign Team

Save & Return

Print



Save & Return Print

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.a.iii

	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		
		iewer Comme	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 Revi	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 Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Fail	0.00		
	Enter Reviewer Comment							
	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Fail	0.00		
Enter Reviewer Comment								
	 9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population. 	3/31/2017	3/31/2017	Completed	Pass & Complete	0.25		

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

Staten Island Performing Provider System, LLC - Project 2.a.iii

0.50

Enter Reviewer Comment
Total

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 Awarded			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.33333333			
	Enter Reviewer Comment					
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333			
	Enter Reviewer Comment					
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333			
	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			

Save & Return Print

NEW YORK STATE Department of Health Medicaid Redesign Team

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



S	ave &	k Re	turn	
	Р	rint		

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.a.iii

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
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) Staten Island Performing Provider System, LLC - Project 2.a.iii

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					
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1			
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					
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5			
Enter Reviewer Comment					

NI YC ST	Department ORK IATE of Health	Medicaid Redesign Team	Delivery System Refo	New York State Departmo rm Incentive Payment (DSI	
	Save & Return Print		Achievement Value (AV) Scorecard DY2, Q4 January 1, 201 Staten Island Performi	7 - March 31, 2017 (Payme ng Provider System, LLC - F	
	Primary Care - Usual So	ource of Care - Q2		Pass & Ongoing	0.5
			Enter Reviewer Comment		
			Total		15.00



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.iv

	Project Snapshot	Payment Snapshot				
Project Domain	System Transformation Projects (Domain 2)	DY2 Q4 Payment Available	\$	2,226,359		
Project ID	2.b.iv	DY2 Q4 Payment Earned	\$	2,226,359		
Project Title	Care transitions intervention patients with a care transition plan developed prior to discharge.					

		2.b.iv Score	esheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)					
	Domain 1 Organizational	Complete	5.00	5.00	100%									
Domain 1	Project Implementation Speed	Complete	0.00	0.00	0%	60%	30%	1,335,815	1,335,815					
	Patient Engagement Speed	Complete	1.00	1.00	100%									
	Domain 1 Subtotal		6.00	6.00	100%	60%	30%	1,335,815	1,335,815					
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	890,544	890,544					
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%	890,544	890,544					
	Total	Complete	21.00	21.00	100%	100%	50%	2,226,359	2,226,359					

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

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.iv

Enter Reviewer Comment						
Module 2 - Project Implementation Speed	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
Enter Reviewer Comment						
Total						

	Domain 1 Project Prescribed Milestones - Project 2.b.iv						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	 Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. 	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Ensure required social services participate in the project.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



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Save & Return Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.iv Print 4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the 9/30/2016 Pass & Complete 9/30/2016 Completed N/A patient in the hospital to develop the transition of care services. Enter Reviewer Comment 5. Protocols will include care record transitions with timely updates 9/30/2016 9/30/2016 Completed Pass & Complete N/A provided to the members' providers, particularly primary care provider. Enter Reviewer Comment 6. Ensure that a 30-day transition of care period is established. 9/30/2016 Pass & Complete 9/30/2016 Completed N/A Enter Reviewer Comment 7. Use EHRs and other technical platforms to track all patients engaged Pass & Complete 9/30/2016 9/30/2016 Completed N/A in the project. Enter Reviewer Comment Total 0.00

	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 Awarded				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.33333333				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333				
	Enter Reviewer Comment						



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Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.333333333
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) Staten Island Performing Provider System, LLC - 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 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

A SA	Department Medicaid ORK Of Health Medicaid	New York State Departm Delivery System Reform Incentive Payment (DS	
	Save & Return Achievement Value (Alievement Valu	/) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payme Staten Island Performing Provider System, LLC - I	
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Enter Review	er Comment	
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Review	er Comment	
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Enter Review	er Comment	
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
	Enter Review	er Comment	
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Review	er Comment	
	Total		15.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.vii

Project Snapshot			Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	1	DY2 Q4 Payment Available	\$ 2,071,592
Project ID	2.b.vii	1	DY2 Q4 Payment Earned	\$ 2,071,592
Project Title	Implementing the INTERACT project (inpatient transfer avoidance program for SNF)			

			2.b.vii Score	esheet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		30%	1,242,955	1,242,955	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	1,242,955	1,242,955	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	40%	20%	828,637	828,637	
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%	828,637	828,637	
Total Complete		22.00	22.00	100%	100%	50%	2,071,592	2,071,592		

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

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.vii

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						

	Domain 1 Project Prescribed N	/lilestones - P	roject 2.b.vii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.			In Process	Pass & Ongoing	N/A			
	Enter Revi	iewer Comme	nt						
	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17			
	Enter Reviewer Comment								
	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17			
	Enter Reviewer Comment								
	4. Educate all staff on care pathways and INTERACT principles.			In Process	Pass & Ongoing	N/A			



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.vii

	Enter Reviewer Comment									
	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Revi	iewer Comme	nt							
	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Revi	iewer Comme	nt							
	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Revi	Enter Reviewer Comment								
	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.			In Process	Pass & Ongoing	N/A				
	Enter Reviewer Comment									
	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.			In Process	Pass & Ongoing	N/A				
	Enter Reviewer Comment									
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Reviewer Comment									
Total 1										

Domain 2 Pay for Performance and Pay for Reporting

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

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

AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.33333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.333333333
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.333333333
	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		
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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
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

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

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 reimbursement	Pass & Ongoing	1			
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					
Primary Care - Length of Relationship - 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			

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

Medicaid Redesign Team

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of Health

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Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.b.viii

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 2,307,626
DY2 Q4 Payment Earned	\$ 2,307,626

		2.b.viii Scor	esheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)							
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	60%									
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%			30%	1,384,575	1,384,575						
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	1,384,575	1,384,575							
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	40%	20%	923,050	923,050.26							
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-							
	Domain 2 Subtotal			14.00	100%	40%	20%	923,050	923,050							
	Total	Complete	21.00	21.00	100%	100%	50%	2,307,626	2,307,626							

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

Hide Reviewer Comments

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



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	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	In Process	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 N	lilestones - Pi	roject 2.b.viii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
	Enter Reviewer Comment						
	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
	Enter Reviewer Comment						
	3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
	Enter Reviewer Comment						



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4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Rev	iewer Comme	nt				
5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Rev	iewer Comme	nt				
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Reviewer Comment						
7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Reviewer Comment						
8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Reviewer Comment						
9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Rev.	iewer Comme	nt				
10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	



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Enter Reviewer Comment						
11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Reviewer Comment						
12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.08	
Enter Reviewer Comment						
Total					1.00	

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.viii (all Milestones are P4R in DY2)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.33333333				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.33333333				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.33333333				
	Enter Reviewer Comment						
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1				
	Enter Reviewer Comment						



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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
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Enter Reviewer Comment		
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1

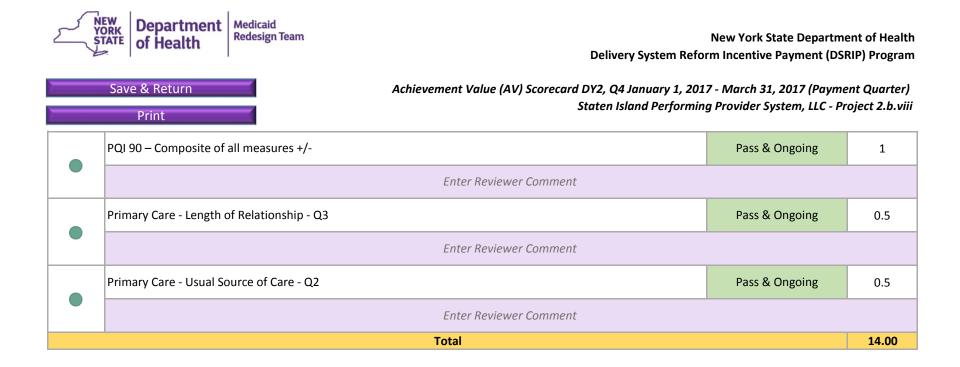


Staten Island Performing Provider System, LLC - Project 2.b.viii

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

Print 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 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 N/A reimbursement Enter Reviewer Comment Potentially Avoidable Emergency Room Visits Pass & Ongoing 1 Enter Reviewer Comment Potentially Avoidable Readmissions Pass & Ongoing 1 Enter Reviewer Comment

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Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.d.i

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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 1,979,209
DY2 Q4 Payment Earned	\$ 1,969,230

	2.d.i Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%							
Domain 1	Project Implementation Speed	Complete	1.00	0.94	94%		30%	1,187,526	1,177,546				
	Patient Engagement Speed	Complete	1.00	1.00	100%								
	Domain 1 Subtotal		7.00	6.94	99%	60%	30%	1,187,526	1,177,546				
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	40%	20%	791,684	791,684				
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%	791,684	791,684				
	Total	Complete	11.00	10.94	99%	100%	50%	1,979,209	1,969,230				

Total Project 2.d.i AVs Awarded: 10.94 out of 11

Hide Reviewer Comments

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



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	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.94
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Enter Reviewer Comment						
Total					1.94	

	Domain 1 Project Prescribed	Milestones - I	Project 2.d.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
•	 Contract or partner with community-based organizations (CBOs) to engage target populations using PAM[®] and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate. 	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059		
	Enter Reviewer Comment							
	2. Establish a PPS-wide training team, comprised of members with training in PAM [®] and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059		
	Enter Rev.							
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059		
	Enter Reviewer Comment							
	 Survey the targeted population about healthcare needs in the PPS' region. 	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059		



Print Enter Reviewer Comment 5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health Pass & Complete 3/31/2017 3/31/2017 Completed 0.059 literacy, and cultural competency. Enter Reviewer Comment 6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect 3/31/2017 3/31/2017 Completed Pass & Complete 0.059 beneficiaries to his/her designated PCP (see outcome measurements in Enter Reviewer Comment 7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM[®] during the first year of the project and again, at set intervals. Baselines, as well as intervals towards 3/31/2017 Pass & Complete 3/31/2017 Completed 0.059 improvement, must be set for each cohort at the beginning of each performance period. Enter Reviewer Comment 8. Include beneficiaries in development team to promote preventive 3/31/2017 3/31/2017 Completed Pass & Complete 0.059 care. Enter Reviewer Comment 9. Measure PAM[®] components 3/31/2017 Pass & Complete 0.059 3/31/2017 Completed Enter Reviewer Comment 10. Increase the volume of non-emergent (primary, behavioral, dental) Pass & Complete 3/31/2017 3/31/2017 Completed 0.059 care provided to UI, NU, and LU persons. Enter Reviewer Comment

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 2.d.i

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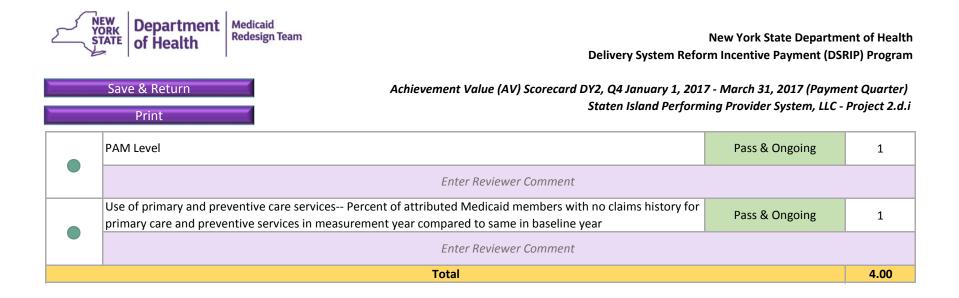
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•	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Re	viewer Comme	nt			
	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Fail	0.000
	Enter Re	viewer Comme	nt			
	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM [®] .	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Re	viewer Comme	nt			
	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage age-appropriate primary and preventive healthcare services and	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Re	viewer Comme	nt			
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Reviewer Comment					
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community	, 3/31/2017	3/31/2017	Completed	Pass & Complete	0.059
	Enter Re	viewer Comme	nt			



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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	0.059
	Enter Reviewer Comment					
Total					0.94	

	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 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					





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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 2,571,952
DY2 Q4 Payment Earned	\$ 1,978,425

3.a.i Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
Domain 1	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	30%	1,187,055	1,187,055			
	Project Implementation Speed	Complete	1.00	1.00	100%							
	Patient Engagement Speed	Complete	1.00	1.00	100%							
Domain 1 Subtotal			7.00	7.00	100%	60%	30%	1,187,055	1,187,055			
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	4.9%	197,842	197,842			
	Domain 3 Pay for Performance		7.00	3.50	50%	30.1%	30.1%	1,187,055	593,527			
Domain 3 Subtotal			9.00	5.50	61%	40%	35%	1,384,897	791,370			
Total Co		Complete	16.00	12.50	78%	100%	65%	2,571,952	1,978,425			

Total Project 3.a.i AVs Awarded: 12.5 out of 16

Hide Reviewer Comments

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



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> Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.i

	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							

	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 Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
		1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.			In Process	Pass & Ongoing	N/A		
		E	nter Reviewei	r 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		E	nter Reviewei	r Comment					
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.			In Process	Pass & Ongoing	N/A		



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

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

	Enter Reviewer Comment								
	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125			
	E	nter Reviewer	r Comment						
	5. Co-locate primary care services at behavioral health sites.			In Process	Pass & Ongoing	N/A			
	Ei	nter Reviewer	r Comment						
	6. 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			
	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, SBIRT) implemented for all patients to identify unmet needs.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.125			
	Enter Reviewer Comment								
	9. Implement IMPACT Model at Primary Care Sites.			In Process	Pass & Ongoing	N/A			
	E	nter Reviewer	r 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)

Staten Island Performing Provider System, LLC - Project 3.a.i Print 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 Pass & Complete 3/31/2017 3/31/2017 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. In Process Pass & Ongoing N/A Enter Reviewer Comment 14. Provide "stepped care" as required by the IMPACT Model. In Process Pass & Ongoing 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 Total 1

	Domain 3 Pay for Performance and Pay for Reporting		
AV Dri ving	Measure	Reviewer Status	AVs Awarded



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

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

	Print		
	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	N/A	N/A
	P4P Measure DY2Q4		
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	P4P Measure DY2Q4		
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
Diaber	P4P Measure DY2Q4		
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
	P4P Measure DY2Q4		
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0

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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		5.50						

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.i



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.iv

	Project Snapshot							
Project Domain Clinical Improvement Projects (Domain 3)								
Project ID	3.a.iv							
	Development of Withdrawal Management (e.g.,							
Project Title	ambulatory detoxification, ancillary withdrawal							
	services) capabilities and appropriate enhanced							

Payment Snapshot	
DY2 Q4 Payment Available	\$ 2,461,713
DY2 Q4 Payment Earned	\$ 1,893,626

	3.a.iv Scoresheet																							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)															
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%																		
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		60% 0%	1,136,175	1,136,175															
	Patient Engagement Speed	Complete	1.00	1.00	100%																			
	Domain 1 Subtotal		7.00	7.00	100%	60%	0%	1,136,175	1,136,175															
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	9.9%	0%	189,363	189,363															
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	7.00	3.50	50%	30.1%	0%	1,136,175	568,087.73															
	Domain 2 Subtotal			5.50	61%	40%	0%	1,325,538	757,450															
Total Complete			16.00	12.50	78%	100%	0%	2,461,713	1,893,626															

Total Project 3.a.iv AVs Awarded: 12.5 out of 16

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



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.iv

	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00	
	Enter Rev	iewer Comme	nt				
•	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
	Enter Reviewer Comment						
Total							

	Domain 1 Project Prescribed Milestones - Project 3.a.iv								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	2. Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.			In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
•	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33			
	Enter Revi	Enter Reviewer Comment							



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

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4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.			In Process	Pass & Ongoing	N/A		
Enter Rev	iewer Comme	nt					
5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33		
Enter Reviewer Comment							
Develop care management services within the SUD treatment program.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment							
7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment							
8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.33		
Enter Reviewer Comment							
Total					1.00		

Domain 3 Pay for Performance and Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs 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	N/A	N/A
P4P Measure DY2Q4		
Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
P4P Measure DY2Q4		
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
P4P Measure DY2Q4		
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
P4P Measure DY2Q4		
Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
P4P Measure DY2Q4		

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.iv



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.a.iv

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



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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.c.i

	Project Snapshot	Payment Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)	DY2 Q4 Payment Available	\$	2,032,206		
Project ID	3.c.i	DY2 Q4 Payment Earned	\$	1,094,265		
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)					

	3.c.i Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%					
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%		0% 30%	937,941	937,941		
	Patient Engagement Speed	Complete	1.00	1.00	100%						
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	937,941	937,941		
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	9.9%	4.9%	156,324	156,324		
Domain 5	Domain 3 Pay for Performance (P4P)	complete	1.00	0.00	0%	30.1%	30.1%	937,941	-		
	Domain 3 Subtotal			5.00	83%	40%	35%	1,094,265	156,324		
	Total Complete		13.00	12.00	92%	100%	65%	2,032,206	1,094,265		

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

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

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)

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	Enter Reviewer Comment					
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.0	
	Enter Reviewer Comme	ent	-			
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
Enter Reviewer Comment						
	Total				2.0	

	Domain 1 Project Prescribed Milestones - Project 3.c.i							
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.			Pass & Ongoing	N/A			
	Enter Reviewer Comme	nt						
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Completed	Pass & Complete	0.25			
	Enter Reviewer Comment							
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Completed	Pass & Complete	0.25			
	Enter Reviewer Comment							
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Pass & Complete	0.25			

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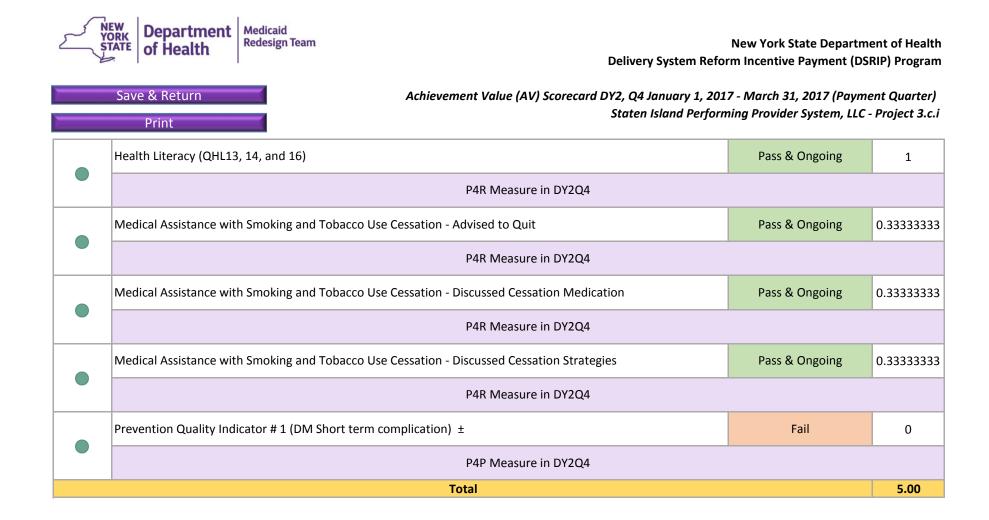


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Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.c.i

Enter Reviewer Comment						
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.			Pass & Ongoing	N/A		
Enter Reviewer Comment						
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	0.25		
Enter Reviewer Comment						
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.			Pass & Ongoing	N/A		
Enter Reviewer Comment						
Total				1.00		

	Domain 3 Pay for Performance and Pay for Reporting							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) \pm	Pass & Ongoing	1					
	P4R Measure in DY2Q4							
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1					
	P4R Measure in DY2Q4							
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1					
	P4R Measure in DY2Q4							





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Project Snapshot			Payment Snapshot					
Project Domain	Clinical Improvement Projects (Domain 3)		DY2 Q4 Payment Available	\$	1,357,629			
Project ID	3.g.ii	1	DY2 Q4 Payment Earned	\$	1,357,629			
Project Title	Integration of Palliative Care into Nursing Homes							

			3.g.ii Score	sheet					
Domain Component		Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%	60% 30%	814,577	814,577
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	60%	30%	814,577	814,577
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	40.0%	20.0%	543,051	543,051
Domain 5	Domain 3 Pay for Performance (P4P) N/A		N/A	N/A	N/A	40.0%	20.076	545,051	545,051
	Domain 2 Subtotal			5.00	100%	40%	20%	543,051	543,051
	Total Complete			12.00	100%	100%	50%	1,357,629	1,357,629

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

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

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 3.g.ii

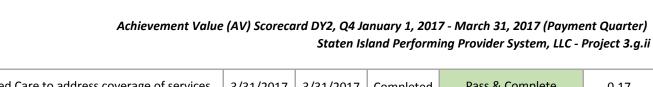
Enter Reviewer Comment									
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	1.00				
Enter Rev	iewer Comme	nt							
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1				
Enter Reviewer Comment									
Total					2.00				

	Domain 1 Project Prescribed Milestones - Project 3.g.ii									
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded				
	1. Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
		iewer Comme	nt							
	2. Contract or develop partnerships with community and provider resources, including Hospice, to bring the palliative care supports and services into the pursing home	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Rev.	iewer Comme	nt							
	Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17				
	Enter Rev	iewer Comme	nt							
	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	0.17				
	Enter Rev	iewer Comme	nt							

NEW YORK STATE Department of Health Medicaid Redesign Team

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	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	Completed	Pass & Complete	0.17		
	Enter Revi	iewer Comme	nt					
	6. Use EHRs or other IT platforms to track all patients engaged in this project.3/31/20173/31/2017CompletedPass & Complete							
	Enter Reviewer Comment							
Total								

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.ii (all Milestones are P4R	in DY2)	
AV Driving	Measure	Reviewer Status	AVs 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 ±	Pass & Ongoing	1
	Percentage of members who had severe or more intense daily pain \pm	Pass & Ongoing	1

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NEW YORK STATE Department of Health Medicaid Redesign Team

YO	Department ATE of Health	Medicaid Redesign Team	New York State Departme Delivery System Reform Incentive Payment (DSR	
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	Print		Staten Island Performing Provider System, LLC - F	Project 3.g.ii
			Total	5.00



Save & Return Print Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 4.a.iii

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

	Payment S	Snapshot	
DY2 Q4 Payment	Available	\$	1,108,369
DY2 Q4 Payment Ea	arned	\$	1,108,369

Domain	Domain Component		AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			665,022	665,022
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	60%	30%		
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	60%	30%	665,022	665,022
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	40%	20%	443,348	443,348
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	40%	20%	443,348	443,348
	Total Complete			16.00	100%	100%	50%	1,108,369	1,108,369

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	Reviewer Status	AVs Awarded					
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1					
	Enter Reviewer Comment							



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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		
Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
	Enter Reviewer Comment Percentage of adults with health insurance - Aged 18- 64 years Enter Reviewer Comment Percentage of premature death (before age 65 years) Enter Reviewer Comment Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics Enter Reviewer Comment Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics Enter Reviewer Comment Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Enter Reviewer Comment Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Enter Reviewer Comment Age-adjusted percentage of adult binge drinking during the past month Enter Reviewer Comment Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Enter Reviewer Comment	Enter Reviewer Comment Percentage of adults with health insurance - Aged 18- 64 years Pass & Ongoing Enter Reviewer Comment Pass & Ongoing Percentage of premature death (before age 65 years) Pass & Ongoing Enter Reviewer Comment Pass & Ongoing Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics Pass & Ongoing Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics Pass & Ongoing Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Pass & Ongoing Enter Reviewer Comment Pass & Ongoing Age-adjusted percentage of adult binge drinking during the past month Pass & Ongoing Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Pass & Ongoing Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Pass & Ongoing Enter Reviewer Comment Pass & Ongoing



Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 4.a.iii

Enter Reviewer Comment				
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1		
Enter Reviewer Comment				
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1		
Enter Reviewer Comment				
Total		11.00		



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

Payment Snapshot	
DY2 Q4 Payment Available	\$ 942,114
DY2 Q4 Payment Earned	\$ 942,114

	4.b.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY2)	Domain Funding % (DY2, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	60%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		30%	565,268	565,268	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal			5.00	100%	60%	30%	565,268	565,268	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	16.00	16.00	100%	40%	20%	376,846	376,846	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			16.00	100%	40%	20%	376,846	376,846	
Total Complete			21.00	21.00	100%	100%	50%	942,114	942,114	

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

	Domain 4 Pay for Performance and Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded			
•	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1			
	Enter Reviewer Comment					



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Asthma emergency department visit rate per 10,000	Pass & Ongoing	1
Enter Reviewer Comment		
Asthma emergency department visit rate per 10,000 - Aged 0-4 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults who are obese	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50- 75 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of children and adolescents who are obese	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 premat	ure death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1		
	Enter Reviewer Comment				
Age-adjusted heart at	tack hospitalization rate per 10,000	Pass & Ongoing	1		
	Enter Reviewer Comment				
Rate of hospitalization	ns for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1		
	Enter Reviewer Comment				
Rate of hospitalizatior	ns for short-term complications of diabetes per 10,000 - Aged 6- 17 years	Pass & Ongoing	1		
	Enter Reviewer Comment				
Age-adjusted percenta	age of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1		
	Enter Reviewer Comment				
Age-adjusted prevent	able hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1		
	Enter Reviewer Comment				
Age-adjusted preventa White non-Hispanics	able hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1		
	Enter Reviewer Comment				
	Total		16.00		

Achievement Value (AV) Scorecard DY2, Q4 January 1, 2017 - March 31, 2017 (Payment Quarter) Staten Island Performing Provider System, LLC - Project 4.b.ii

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