

Achievement Value (AV) Scorecard Community Care of Brooklyn

	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
Scorecard Overview	Ine 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 (olds on the purper fink belief to access each behindular project operations) Doman 1/Organizations (AM Projects) AV Adjustments (acclumes) 2 AV 2 AV 2 AV 2 AV 2 AV
3. Show or Hide reviewer comments	Scorecard Overview Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



Print Summary

Print All

Achievement Value (AV) Scorecard
Community Care of Brooklyn

	PPS Information					
Quarter	DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)					
PPS	Community Care of Brooklyn					
PPS Number	33					

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Payme	ent Data				
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY4, Q2 Payment Available	DY4, Q2 Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment				
2.a.i	28.00	21.33	0.00	21.33	\$ 4,199,478	\$ 1,679,791				
2.a.iii	29.00	21.33	0.00	21.33	\$ 3,291,741	\$ 1,206,972				
2.b.iii	29.00	21.33	0.00	21.33	\$ 2,993,973	\$ 1,097,790				
2.b.iv	29.00	21.33	0.00	21.33	\$ 2,968,668	\$ 1,088,512				
3.a.i	16.00	10.50	0.00	10.50	\$ 2,725,425	\$ 1,413,814				
3.b.i	14.00	14.00	0.00	14.00	\$ 606,840	\$ 606,840				
3.d.ii	12.00	10.00	0.00	10.00	\$ 2,191,286	\$ 1,351,293				
3.g.i	11.00	11.00	0.00	11.00	\$ 467,110	\$ 467,110				
4.a.iii	16.00	16.00	0.00	16.00	\$ 1,553,990	\$ 1,553,990				
4.c.ii	16.00	16.00	0.00	16.00	\$ 1,497,024	\$ 1,497,024				



Print Summary

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Achievement Value (AV) Scorecard
Community Care of Brooklyn

AV Adjustments (Column F)						
Total	200.00	162.83	0.00	162.83 \$	22,495,535 \$	11,963,136



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Community Care of Brooklyn - 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 Awarde
Workforce Strategy		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
Budget Updates			I				



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	Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing
	Create a workforce transition roadmap	N/A	N/A	In Process	Pass & Ongoing
	for achieving defined target workforce	IV/A	IN/A	III PIOCESS	r ass & Oligonig
Additional Workforce Strategy	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing
Budget Jpdates	A Dandara and the Charles				
non AV- driving)	4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	N/A	Completed	Pass & Complete
	partial placements				
	5. Develop training strategy	9/30/2016	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



	 Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce				1		N1/A
Strategy Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				1

			Section 01 -	Budget			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
O		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly Project							
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1



Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Community Care of Brooklyn - Domain 1 Organizational AVs

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 1

			Section 02 - Go	vernance			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize governance structure and subcommittee structure	9/30/2015	N/A	Completed	Pass & Complete	
Governance Structure		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed	Pass & Complete	
Updates							1
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete	
Governance Process		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,	N/A	N/A	Completed	Pass & Complete	
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	Completed	Pass & Complete	
dditional							
Governance Milestones non AV-	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	N/A	Completed	Pass & Complete	N/A
riving)							
		8. Finalize workforce communication and engagement plan	N/A	N/A	In Process	Pass & Ongoing	
		9. Inclusion of CBOs in PPS Implementation	N/A	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	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
1							a contract of



2	Print				community cu	re oj brooklyn - bollidin 1 Orga	ilizational AV3
Additional Governance							N/A
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

		Sec	ction 03 - Financia	al Sustainability			
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		3. 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	
Additional	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
inancial						
Stability 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				



		Section 04	- Cultural Compe	tency & Health I	iteracy		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize cultural competency / health literacy strategy.	12/31/2015	N/A	Completed	Pass & Complete	
Cultural							
Competency /Health Literacy		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	N/A	Completed	Pass & Complete	1
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Cultural Competency							N/A
/Health Literacy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



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

		Sect	ion 05 - IT Systen	ns and Processes	5		
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving		Date	Date	Status	Reviewer Status	AVAWaraca
		1. Perform current state assessment of IT					
		capabilities across network, identifying					
		any critical gaps, including readiness for	3/31/2017	N/A	Complete	Pass & Complete	
		data sharing and the implementation of					
		interoperable IT platform(s).					
		Develop an IT Change Management					
		Strategy.	N/A	N/A	In Process	Pass & Ongoing	
		Strategy.					
IT Systems							
and		3. Develop roadmap to achieving clinical					N/A
Processes		data sharing and interoperable systems	N/A	N/A	In Process	Pass & Ongoing	IV/A
Fiocesses		across PPS network					
		4. Dayalan a specific plan for angaging					
		4. Develop a specific plan for engaging	3/31/2017	N/A	Complete	Pass & Complete	
		attributed members in Qualifying Entities					
		5. Develop a data security and	6/30/2016	N/A	Complete	Pass & Complete	
		confidentiality plan.	0/30/2016	IN/A	Complete	rass & 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	N/A
Additional IT							
Systems and		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Processes Topic Areas							
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
					I		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

Section 06 - Performance Reporting									
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded		
Measure	Driving	ivillestorie	Date	Date	Status				
		1. Establish reporting structure for PPS-							
		wide performance reporting and	9/30/2016	N/A	Completed	Pass & Complete			
		communication.					N/A		
Derformanc									

Save & Return Print

		Total				0
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
e Reporting Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
Additional Performanc						N/A
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	the network, focused on clinical quality and performance reporting.	N/A	N/A	In Process	Pass & Ongoing	N/A
e Reporting	Develop training program for organizations and individuals throughout					



Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	9/30/2016	N/A	Completed	Pass & Complete	
						·	
Practitioner Engagement	•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	12/31/2016	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk	N/A	N/A	In Process	Pass & Ongoing	
		Mitigation Strategies	N/A	IV/A	III FTOCESS	i ass & Oligonig	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
				l I			
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Practitioner Engagement Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



		Section	08 - Population H	lealth Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	A۱
		Develop population health management roadmap.	12/31/2016	N/A	Completed	Pass & Complete	
opulation							
lealth		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional opulation							
ealth Topic reas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	



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

		9	Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Perform a clinical integration 'needs assessment'.	N/A	N/A	In Process	Pass & Ongoing	N/A
Clinical Integration							IN/A
	•	2. Develop a Clinical Integration strategy.	N/A	N/A	In Process	Pass & Ongoing	N/A
							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							N/A



Save & Return Print

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



Save & Return

Print

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AV	Awarded	Adjusted	Net A	AVs Awarded
Adjustment		Projects	Available	Net	Percentage	· •	Net	Percentage AV
	Project	Selected	Available	Awarded	AV	AVs	Awarded	
Organizational Adjustments (applied to all projects)	5.00	10.00	50.00	50.00	100%	0.00	50.00	100%
Project Adjustments (applied to one project only)	Various	10.00	150.00	112.83	75%	0.00	112.83	75%
Total			200.00	162.83	81%	0.00	162.83	81%

Hic	Hide Reviewer Comments							
	No AV Adjustments							
	Please note that there are no AV adjustments for Community Care of Brooklyn in DY2, Q1							



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 2.a.i

	Project Snapshot
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 Snapsho	t	
DY4, Q2 Payment Available	\$	4,199,478
DY4, Q2 Payment Earned	\$	1,679,791

			2.a.i Scores	heet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	839,896	839,896	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	839,896	839,896	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	335,958	335,958	
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	1.33	17%	72%	72%	3,023,624	503,937	
	Domain 2 Subtotal			16.33	71%	80%	80%	3,359,582	839,896	
	Total	Complete	28.00	21.33	76%	100%	100%	4,199,478	1,679,791	

Total Project 2.a.i AVs Awarded: 21.33 out of 28

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.a.i								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A		Pass & Ongoing	N/A			
	Enter Revie	wer Commen	nt						
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00			



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 2.a.i

Enter Reviewer Comment

Total 0.00

	Domain 1 Project Prescribed M	lilestones - P	roject 2.a.i					
AV Driving	i i	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
		wer Commen	rt					
	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	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commen	nt					
	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	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commen	rt					
	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



Enter Reviewer Comment							
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A		
Enter Revie	wer Commen	t					
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 Reviewer Comment							
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
Total					0.00		



AV Driving	Measure	Reviewer Status	AVs 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		
	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	
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Pass & Ongoing	
Enter Reviewer Comment		
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	
Enter Reviewer Comment		
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Pass & Ongoing	
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	
Enter Reviewer Comment		
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	
Enter Reviewer Comment		
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	



Print

	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				

	Domain 2 Pay for Performance - Project 2.a.i						
AV Driving	Measure	Reviewer Status	Avs				
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0				
	Enter Reviewer Comment						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0				
	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	Fail	0				
	Enter Reviewer Comment						
	Children's Access to Primary Care- 12 to 24 months	Please Select	0				
	Enter Reviewer Comment						
	Children's Access to Primary Care- 25 months to 6 years	Please Select	0				



Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Please Select	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Please Select	0
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Please Select	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
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		1.33



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - 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	
DY4, Q2 Payment Available	\$ 3,291,741
DY4, Q2 Payment Earned	\$ 1,206,972

	2.a.iii Scoresheet																		
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)										
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%													
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	658,348	548,623										
	Patient Engagement Speed	Complete	1.00	0.00	0%														
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	658,348	548,623										
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	263,339	263,339										
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	1.33	17%	72%	72%	2,370,053	395,009										
	Domain 2 Subtotal			16.33	71%	80%	80%	2,633,393	658,348										
	Total	Complete	29.00	21.33	74%	100%	100%	3,291,741	1,206,972										

Total Project 2.a.iii AVs Awarded: 21.33 out of 29

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed	Milestone	Reviewer Status	AVs	
711 21111118	,		Due Date	Status		Awarded	
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	Completed	Pass & Ongoing	N/A	
	Enter Reviewer Comment						



	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0.00
	Enter Reviewer Comment					
•	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Fail	0
	Enter Reviewer Comment					
Total						0.00

	Domain 1 Project Prescribed M	lilestones - Pr	oject 2.a.iii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	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	N/A	
		ewer Commen	rt ·				
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
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.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	



	Print			Comm	unity Care of Brooklyn - P	roject 2.a.iii	
	Enter Reviewer Comment						
	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	ewer Commer	nt				
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	ewer Commen	nt				
	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	Pass & Complete	N/A	
	Enter Revie	ewer Commer	nt				
•	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	Pass & Complete	N/A	
	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	N/A	
	Enter Reviewer Comment						
	Total					0.00	
	Domain 2 Pay for Report	ing - Project 2	2.a.iii				
AV Dri ving	Measure				Reviewer Status	AVs 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		
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	1



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



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

	Domain 2 Pay for Performance - Project 2.a.iii		
AV Driving	Measure	Reviewer Status	AVS
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Please Select	0
	Enter Reviewer Comment		



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Children's Access to Primary Care- 25 months to 6 years	Please Select	0
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Please Select	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Please Select	0
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Please Select	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
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		1.33



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 2.b.iii

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,993,973
DY4, Q2 Payment Earned	\$ 1,097,790

	2.b.iii Scoresheet																			
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)											
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%														
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	598,795	498,995											
	Patient Engagement Speed	Complete	1.00	0.00	0%															
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	598,795	498,995											
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	239,518	239,518											
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	1.33	17%	72%	72%	2,155,660	359,277											
	Domain 2 Subtotal			16.33	71%	80%	80%	2,395,178	598,795											
	Total	Complete	29.00	21.33	74%	100%	100%	2,993,973	1,097,790											

Total Project 2.b.iii AVs Awarded: 21.33 out of 29

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.b.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	In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						



	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Ongoing	0.00
	Enter Reviewer Comment					
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						0.00

	Domain 1 Project Prescribed M	ilestones - Pr	oject 2.b.iii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



Print Community Care of Brooklyn - Project 2.b.iii								
•	care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment						
	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2017	3/31/2017	Completed	Pass (with Exception) & Complete	N/A		
	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	N/A		
	Enter Reviewer Comment							
	Total					0.00		

Domain 2 Pay for Reporting - Project 2.b.iii			
AV Driving	Measure	Reviewer Status	AVs 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		
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	1
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
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



Time		
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

	Domain 2 Pay for Performance - Project 2.b.iii		
AV Driving	Measure	Reviewer Status	Avorded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Please Select	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Please Select	0
	Enter Reviewer Comment		



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Children's Access to Primary Care- 7 to 11 years	Please Select	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Please Select	0
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Please Select	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
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		1.33



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 2.b.iv

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,968,668
DY4, Q2 Payment Earned	\$ 1,088,512

	2.b.iv Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	20% 20%	20%	593,734	494,778
	Patient Engagement Speed	Complete	1.00	0.00	0%						
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	593,734	494,778		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	237,493	237,493		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	1.33	17%	72%	72%	2,137,441	356,240		
	Domain 2 Subtotal			16.33	71%	80%	80%	2,374,935	593,734		
	Total	Complete	29.00	21.33	74%	100%	100%	2,968,668	1,088,512		

Total Project 2.b.iv AVs Awarded: 21.33 out of 29

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		
	Enter Reviewer Comment							



	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						0.00

	Domain 1 Project Prescribed Milestones - Project 2.b.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure required social services participate in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



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5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Revie	wer Commen	t				
6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
Total						

	Domain 2 Pay for Reporting - Project 2.b.iv					
AV Driving	Measure	Reviewer Status	AVs 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- 25 months to 6 years Pass & Ongoing Enter Reviewer Comment Children's Access to Primary Care- 7 to 11 years Pass & Ongoing	0.25
Enter Reviewer Comment	
	0.25
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	1
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	



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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		
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

	Domain 2 Pay for Performance - Project 2.b.iv		
AV Driving	Measure	Reviewer Status	Avs
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Please Select	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Please Select	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Please Select	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Please Select	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Please Select	0



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

Save &	Return

· · · · · ·		
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
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		1.33





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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.a.i

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,725,425
DY4, Q2 Payment Earned	\$ 1,413,814

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	545,085	545,085
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	545,085	545,085
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	272,542	272,542
Domain 3	Domain 3 Pay for Performance	Complete	8.00	2.50	31%	70%	70%	1,907,797	596,187
Domain 3 Subtotal		10.00	4.50	45%	80%	80%	2,180,340	868,729	
	Total	Complete	16.00	10.50	66%	100%	100%	2,725,425	1,413,814

Total Project 3.a.i AVs Awarded: 10.5 out of 16

Hide Reviewer Comments

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



Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00			
Enter Reviewer Comment								
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1			
Enter Reviewer Comment								
Total					1			

		Domain 1 Project Prescribed Milestones	- Project 3.a	ili Models 1,	2 and 3		
		✓ 3.a.i Model 1 ✓ 3.a.i M	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.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Ent	er Reviewer	Comment			
	•	Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
3.a.i Model 1		Enter Reviewer 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.	3/31/2018	3/31/2018	Completed	Fail	N/A
		Ent	er 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	N/A



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		En	ter Reviewer	Comment					
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
		En	ter Reviewer	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	N/A		
		Ent	ter 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.	3/31/2018	3/31/2018	Completed	Fail	N/A		
		En	ter 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	N/A		
		Enter Reviewer Comment							
		9. Implement IMPACT Model at Primary Care Sites.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
		En	ter Reviewer	Comment					
		10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		En	ter Reviewer	Comment					
		11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		



3.a.i Model 3	Ent	ter Reviewer	Comment			
	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Ent	er Reviewer	Comment			
	13. Measure outcomes as required in the IMPACT Model.	3/31/2018	3/31/2018	Completed	Fail	N/A
	Ent	er Reviewer	Comment			
	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Ent	er Reviewer	Comment			
	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	Total					0

	Domain 3 Pay for Performance and Pay for Reporting		
AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
	P4R Measure DY3Q4		
	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
	P4R Measure DY3Q4		
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1



Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.a.i

P4R Measure DY3Q4

Total 2

AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
	P4P Measure DY3Q4		
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	P4P Measure DY3Q4		
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	P4P Measure DY3Q4		
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Fail	0
	P4P Measure DY3Q4		
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
	P4P Measure DY3Q4		
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	P4P Measure DY3Q4		
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
	P4P Measure DY3Q4		
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
	P4P Measure DY3Q4		
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
	P4P Measure DY3Q4		
	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
	P4P Measure DY3Q4		
	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Please Select	0
	P4P Measure DY3Q4		
	Total		2.5



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.b.i

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 606,840
DY4, Q2 Payment Earned	\$ 606,840

			3.b.i Scores	heet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		20% 67%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%		404,560	404,560
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	67%	404,560	404,560
Damain 2	Domain 3 Pay for Reporting (P4R)	Camanlata	8.00	8.00	100%	10%	33%	202,280	202,280
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	0.00	0.00	N/A	70%	0%	-	-
Domain 2 Subtotal		8.00	8.00	100%	80%	33%	202,280	202,280	
	Total	Complete	14.00	14.00	100%	100%	100%	606,840	606,840

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

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



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Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00		
Enter Reviewer Comment							
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total 1					1.00		

	Domain 1 Project Prescribed N	lilestones - P	roject 3.b.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	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.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	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	N/A		
	Enter Reviewer Comment							



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	5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	nt				
	6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	nt				
	7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	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	N/A	
	Enter Revie	wer Commer	nt				
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment							
	12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	



	PIIIIL						
	Enter Revie	wer Commer	t				
	13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	14. Develop and implement protocols for home blood pressure monitoring with follow up support.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	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	N/A	
	Enter Revie	wer Commer	t				
	16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A	
-							



Enter Reviewer Comment	
Total	0.00

AV Driving	Domain 3 Pay for Performance and Pay for Reporting Measure	Reviewer Status	AVs Awarded
	Aspirin Use	Pass & Ongoing	0.5
	P4R Measure DY3Q4		
	Discussion of Risks and Benefits of Aspirin Use	Pass & Ongoing	0.5
	P4R Measure DY3Q4		
	Controlling High Blood Pressure	Pass & Ongoing	1
	P4R Measure DY3Q4		
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
	P4R Measure DY3Q4		
	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1
	P4R Measure DY3Q4		
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	P4R Measure DY3Q4		
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333



	P4R Measure DY3Q4				
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333		
	P4R Measure DY3Q4				
	Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy	Pass & Ongoing	0.5		
	P4R Measure DY3Q4				
	Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%	Pass & Ongoing	0.5		
	P4R Measure DY3Q4				
	Prevention Quality Indicator # 8 (Heart Failure) ±	Pass & Ongoing	1		
	P4R Measure in DY3Q4				
	Prevention Quality Indicator # 7 (HTN) ±	Pass & Ongoing	1		
	P4R Measure DY3Q4				
Total 8.					



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.d.ii

Project Snapshot					
Project Domain	Clinical Improvement Projects (Domain 3)				
Project ID	3.d.ii				
Project Title	Expansion of asthma home-based self-management program				

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,191,286
DY4, Q2 Payment Earned	\$ 1,351,293

	3.d.ii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20% 20%	438,257	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				365,214
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	438,257	365,214
Domain 2	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	219,129	219,129
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	2.00	1.00	50%	70%	70%	1,533,900	766,950
	Domain 2 Subtotal			5.00	83%	80%	80%	1,753,029	986,079
	Total	Complete	12.00	10.00	83%	100%	100%	2,191,286	1,351,293

Total Project 3.d.ii AVs Awarded: 10 out of 12

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



	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Ongoing	0.00
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total					0.00	

	Domain 1 Project Prescribed Milestones - Project 3.d.ii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	t				
	2. Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce exposure to asthma	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Develop and implement evidence-based asthma management guidelines.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	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	N/A	



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	Enter Reviewer Comment						
	5. Ensure coordinated care for asthma patients includes social services and support.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	t				
	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	N/A	
	Enter Revie	wer Commen	t				
	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	t				
	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment							
Total						0.00	

	Domain 3 Pay for Performance and Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1			
	P4R Measure DY3Q4					
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5			
	P4R Measure DY3Q4					
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5			
	P4R Measure DY3Q4					
	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1			



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

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	P4R Measure DY3Q4		
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1
	P4R Measure DY3Q4		
Total			

Domain 3 Pay for Performance and Pay for Reporting					
AV Driving	Measure	Reviewer Status	Avs		
	Asthma Medication Ratio (5 – 64 Years)	Fail	0		
	P4P Measure DY3Q4				
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5		
	P4P Measure DY3Q4				
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5		
	P4P Measure DY3Q4				
Total					



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.g.i

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

Payment Snapsho	ot	
DY4, Q2 Payment Available	\$	467,110
DY4, Q2 Payment Earned	\$	467,110

	3.g.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%		311,406	311,406
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		67%		
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	67%	311,406	311,406
Domain 2	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	33%	155,703	155,703
Domain 3	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	70%	0%	-	-
Domain 2 Subtotal		5.00	5.00	100%	80%	33%	155,703	155,703	
	Total	Complete	11.00	11.00	100%	100%	100%	467,110	467,110

Total Project 3.g.i AVs Awarded: 11 out of 11

Hide Reviewer Comments

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



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Community Care of Brooklyn - Project 3.g.i

	Module 2 - Project Implementation Speed	3/17/2017	N/A	Completed	Pass & Ongoing	0.00	
	Enter Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
Enter Reviewer Comment							
	Total					1.00	

	Domain 1 Project Prescribed Milestones - Project 3.g.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



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

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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 3.g.i

6. Use EHRs or other IT platforms to track all patients engaged in this project.		3/31/2017	Completed	Pass & Complete	N/A
Total					0.00

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i (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 ±	Pass & Ongoing	1			
	Total		5.00			



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 4.a.iii

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 1,553,990
DY4, Q2 Payment Earned	\$ 1,553,990

	4.a.iii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	310,798	310,798	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	310,798	310,798	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	1,243,192	1,243,192	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			11.00	100%	80%	80%	1,243,192	1,243,192	
	Total	Complete	16.00	16.00	100%	100%	100%	1,553,990	1,553,990	

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

Hide Reviewer Comments

	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							



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 4.a.iii

	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		
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1



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

Save & Return

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 4.a.iii

	Print	unity Care of Brooklyn - Pi	roject 4.a.ııı	
	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				



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 4.c.ii

Project Snapshot				
Project Domain	Domain 4: Population-wide Projects: New York's			
Project ID	4.c.ii			
Project Title	Increase early access to, and retention in, HIV care			

Payment Snapshot				
DY4, Q2 Payment Available	\$	1,497,024		
DY4, Q2 Payment Earned	\$	1,497,024		

	4.c.ii Scoresheet										
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	299,405	299,405		
	Patient Engagement Speed	N/A	0.00	0.00	0%						
Domain 1 Subtotal		5.00	5.00	100%	20%	20%	299,405	299,405			
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	1,197,619	1,197,619		
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-		
	Domain 4 Subtotal			11.00	100%	80%	80%	1,197,619	1,197,619		
Total Complete			16.00	16.00	100%	100%	100%	1,497,024	1,497,024		

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

Hide Reviewer Comments

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (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					



Print

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Community Care of Brooklyn - Project 4.c.ii

	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
	Enter Reviewer Comment		
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Enter Reviewer Comment		
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	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 adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
	Enter Reviewer Comment		



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

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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)

Community Care of Brooklyn - Project 4.c.ii

Print Community Care of Brooklyn - Project 4					
	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					