

Achievement Value (AV) Scorecard Westchester Medical Center

	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	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	Puject Life (sick on the purper the before the access each buildwale priorit report) Connect L: Organizational (UK Priorith) AV/Adjustantial (UK Priorith) 2.4 2.4 3.6 M 2.6 M
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 Westchester Medical Center

	PPS Information
Quarter	DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter)
PPS	Westchester Medical Center
PPS Number	21

Achievement Value (AV) Scorecard Summary							
Project Link (click on the purple link below to access		AV I	Data	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	22.83	0.00	22.83	\$ 3,966,973	\$ 2,122,330	
2.a.iii	29.00	23.83	0.00	23.83	\$ 3,258,585	\$ 1,743,343	
2.a.iv	29.00	23.83	0.00	23.83	\$ 3,825,295	\$ 2,046,533	
2.b.iv	29.00	23.83	0.00	23.83	\$ 3,046,068	\$ 1,629,647	
2.d.i	14.00	12.00	0.00	12.00	\$ 3,526,498	\$ 2,774,178	
3.a.i	15.00	9.50	0.00	9.50	\$ 2,731,147	\$ 1,229,016	
3.a.ii	15.00	9.50	0.00	9.50	\$ 2,621,036	\$ 1,179,466	
3.c.i	12.00	12.00	0.00	12.00	\$ 637,549	\$ 637,549	
3.d.iii	12.00	11.00	0.00	11.00	\$ 2,196,003	\$ 1,427,402	
4.b.i	22.00	22.00	0.00	22.00	\$ 1,629,292	\$ 1,629,292	

YORK STATE Of Health Medicaid Redesign Team			Delivery				•	ment of Health DSRIP) Program
Print Summary Print All					A			(AV) Scorecard Medical Center
4.b.ii	22.00	22.00	0.00	22.00	\$	1,204,260	\$	1,204,260
AV Adjustments (Column F)								
Total	227.00	192.33	0.00	192.33	\$	28,642,706	\$	17,623,016



Save & Return	
Print	

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Westchester Medical Center - 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 Strategy									
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded		
Measure	Driving	Whiestone	Date	Date	Status	Reviewer Status	AV Awarueu		
Workforce Strategy		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete			
Budget Updates									



Save & Return Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 20							
	Print Westchester Medical Center - Domain 1 Orga						
]
	•	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	
	•	 Create a workforce transition roadmap for achieving defined target workforce 	12/31/2016	N/A	Completed	Pass & Complete	
Additional Workforce Strategy	•	 Perform detailed gap analysis between current state assessment of workforce and projected future state 	3/31/2017	N/A	Completed	Pass & Complete	
Budget							1
Updates (non AV- driving)		4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	6/30/2016	N/A	Completed	Pass & Complete	
	•	5. Develop training strategy	3/31/2017	N/A	Completed	Pass & Complete	
	•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	-						



Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Westchester Medical Center - Domain 1 Organizational AVs

	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce						N/A
Strategy Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	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		
Quantarily		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	

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Budget and Flow of	Print					
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 - Go	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	9/30/2016	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		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Update							



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

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

	Prin			()	Westchester N	Aedical Center - Domain 1 Orga	niza
		5. Finalize community engagement plan,					
	•	including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	6/30/2016	N/A	Completed	Pass & Complete	
		6. Finalize partnership agreements or contracts with CBOs	3/31/2016	N/A	Completed	Pass & Complete	
dditional							
overnance lilestones 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	12/31/2016	N/A	Completed	Pass & Complete	
riving)							
		8. Finalize workforce communication and engagement plan	3/31/2017	N/A	Completed	Pass & Complete	
		9. Inclusion of CBOs in PPS Implementation	3/31/2016	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	



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Additional Governance 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				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		 Finalize Compliance Plan consistent with New York State Social Services Law 363-d 	12/31/2015	N/A	Completed	Pass & Complete	1



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Westchester Medical Center - Domain 1 Organizational AVs

	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	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional inancial						
tability opic 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				





Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Westchester Medical Center - Domain 1 Organizational AVs

Section 04 - Cultural Competency & Health Literacy								
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		 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							NI / A	
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A	
Topic Areas	-							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		



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	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
			1				
		Total					

		Sect	ion 05 - IT Syster	ns and Processes	;		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	12/31/2016	N/A	Complete	Pass & Complete	
		2. Develop an IT Change Management Strategy.	12/31/2016	N/A	Complete	Pass & Complete	
IT Systems				•			
and Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2016	N/A	Complete	Pass & Complete	N/A
							-
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete	



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	-							
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		
Additional IT Systems and		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A	
Processes Topic Areas							,,,	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing		
		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		Date	Date	Status	Neviewei Status	AV Awarueu		
		 Establish reporting structure for PPS- wide performance reporting and communication. 	9/30/2016	N/A	Completed	Pass & Complete	N/A		
Derformanc									



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	Print				Westchester N	Aedical Center - Domain 1 Orgc	inizational AVs
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	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
-		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Performanc							NI (A
e Reporting Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
_		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

Section 07 - Practitioner Engagement



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

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

Westchester Medical Center - Domain 1 Organizational AVs

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	3/31/2016	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.	6/30/2016	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner							N/A
Engagement Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	



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	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

		Section	08 - Population I	lealth Managem	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Develop population health management roadmap. 	N/A	N/A	In Process	Pass & Ongoing	N/A
Population							
Health		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Risks to Implementation & Risk 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 Health Topic Areas							N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	



Save & Return

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

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

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Westchester Medical Center - Domain 1 Organizational AVs

		2	Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform a clinical integration 'needs assessment'.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Clinical							
Integration		2. Develop a Clinical Integration strategy.	12/31/2016	N/A	Completed	Pass & Complete	N/A
							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 Clinical							N/A



Sa	ive & Re	turn	Achieveme	Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2					
	Print Westchester Medical Center - Domain 1 Organiz								
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	19/ <i>1</i> 5		
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing			
			Total				0		





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

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	Vs Awarded
Adjustment		Projects	Available	Net	Percentage		Net	Dercentage AV
	Project	Selected	Available	Awarded	AV	AVs	Awarded	Percentage AV
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	172.00	137.33	80%	0.00	137.33	80%
Total			227.00	192.33	85%	0.00	192.33	85%

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Westchester Medical Center in DY2, Q1



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

Westchester Medical Center - 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 Sna	apshot	
DY4, Q2 Payment Available	\$	3,966,973
DY4, Q2 Payment Earned	\$	2,122,330

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

			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%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	793,395	793,395
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	793,395	793,395
Demain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	317,358	317,358
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	2.83	35%	72%	72%	2,856,220	1,011,578
	Domain 2 Subtotal		23.00	17.83	78%	80%	80%	3,173,578	1,328,936
	Total	Complete	28.00	22.83	82%	100%	100%	3,966,973	2,122,330

Total Project 2.a.i AVs Awarded: 22.83 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 Reviewer Comment					
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00



Save & Return	
Print	

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.i

Enter Reviewer Comment	
Total	0.00

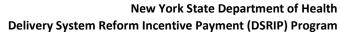
Domain 1 Project Prescribed Milestones - Project 2.a.i							
AV Driving		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term 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	
	Enter Revie	wer Commer	nt				
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	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	



Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.i

	Enter Reviewer Comment						
	 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	Fail	N/A	
	Enter Reviewer Comment						
	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 Reviewer Comment						
Total						0.00	

Domain 2 Pay for Reporting - Project 2.a.i



NEW YORK STATE Department of Health Medicaid Redesign Team

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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.i

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		



Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.i

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

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

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

	Print	tchester Medical Center -	Project 2.a
	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.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



Save & Return Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.i Print 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) Pass & Ongoing 1 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 Pass & Ongoing 1 Enter Reviewer Comment Primary Care - Length of Relationship - Q3 Fail 0 Enter Reviewer Comment Primary Care - Usual Source of Care - Q2 Pass & Ongoing 0.5 Enter Reviewer Comment Total 2.83



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

Westchester Medical Center - Project 2.a.iii

Project SnapshotProject DomainSystem Transformation Projects (Domain 2)Project ID2.a.iiiProject TitleHealth Home At-Risk Intervention Program:
Proactive management of higher risk patients not
currently eligible for Health Homes through access

Payment	Snapshot	
DY4, Q2 Payment Available	\$	3,258,585
DY4, Q2 Payment Earned	\$	1,743,343

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

	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%	651,717	651,717							
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	651,717	651,717							
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	260,687	260,687							
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	2.83	35%	72%	72%	2,346,181	830,939							
	Domain 2 Subtotal			17.83	78%	80%	80%	2,606,868	1,091,626							
	Total Complete		29.00	23.83	82%	100%	100%	3,258,585	1,743,343							

Total Project 2.a.iii AVs Awarded: 23.83 out of 29

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.iii

	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	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						

	Domain 1 Project Prescribed Milestones - Project 2.a.iii							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	ewer Commer	nt					
	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	Fail	N/A		

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Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 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 Reviewer Comment					
	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 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	Pass & Complete	N/A
	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	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 Reporting - Project 2.a.iii				
AV Driving	Measure	Reviewer Status	AVs	
			Awarded	

Westchester Medical Center - Project 2.a.iii

0.3333333

Pass & Ongoing

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

	Addit Access to Preventive of Ambulatory cure 20 to 44 years	i uss & ongoing	0.33333333
	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

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NEW YORK STATE Department of Health Medicaid Redesign Team

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Adult Access to Preventive or Ambulatory Care - 20 to 44 years



Save & Return

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

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

Westchester Medical Center - Project 2.a.iii 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 Pass & Ongoing Potentially Avoidable Emergency Room Visits 1 Enter Reviewer Comment



Save & Return Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Qual				
Print Westchester Medical Center - Project				
	Potentially Avoidable Readmissions	Pass & Ongoing	1	
	Enter Reviewer Comme	nt		
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1	
	Enter Reviewer Comme	nt		
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5	
	Enter Reviewer Comme	nt		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5	
	Enter Reviewer Comme	nt		
Total				

Domain 2 Pay for Performance - Project 2.a.iii



Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.a.iv

	Project Snapshot
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iv
Project Title	Create a medical village using existing hospital infrastructure

Payment Snapshot	
DY4, Q2 Payment Available	\$ 3,825,295
DY4, Q2 Payment Earned	\$ 2,046,533

				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%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%	765,059	765,059
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	765,059	765,059
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	306,024	306,024
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	2.83	35%	72%	72%	2,754,213	975,450
	Domain 2 Subtotal		23.00	17.83	78%	80%	80%	3,060,236	1,281,474
	Total	Complete	29.00	23.83	82%	100%	100%	3,825,295	2,046,533

Total Project 2.a.iv AVs Awarded: 23.83 out of 29

	Domain 1 Project Milestones - Project 2.a.iv						
AV Driving	g Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs	
		Due Date	Due Date	Status		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 Revie	wer Commen	nt			
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Enter Revie	wer Commer	nt			
Total					1.00

	Domain 1 Project Prescribed M	ilestones - Pi	oject 2.a.iv					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Convert outdated or unneeded hospital capacity into an outpatient services center, stand-alone emergency department/urgent care center or other healthcare-related purpose.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A		
	Enter Revie	wer Commer	nt					
	2. Provide a detailed timeline documenting the specifics of bed reduction and rationale. Specified bed reduction proposed in the project must include active or "staffed" beds.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure that all participating PCPs meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					
•	4. Ensure that all safety net providers participating in Medical Villages 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		



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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 Revie	wer Commer	nt			
Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
Enter Reviewer Comment					
7. Ensure that services which migrate to a different setting or location					
(clinic, hospitals, etc.) are supported by the comprehensive community	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
needs assessment.					
Enter Reviewer Comment					
Total					0.00

	Domain 2 Pay for Reporting - Project 2.a.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



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

Print	
	Enter Reviewer Comment
Children's Access to Primary Care- 12 to 24 months	
	Enter Reviewer Comment
Children's Access to Primary Care- 25 months to 6 years	
	Enter Reviewer Comment
Children's Access to Primary Care- 7 to 11 years	
	Enter Reviewer Comment
Children's Access to Primary Care- 12 to 19 years	

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Pass & Ongoing	0.25
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Pass & Ongoing	0.25
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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

2	NEW YORK STATE of Health	Medicaid Redesign Team	New York State Departme Delivery System Reform Incentive Payment (DSR	
	Save & Return Print		Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payme Westchester Medical Center - P	-
			Enter Reviewer Comment	
			Total	15.00

Domain 2 Pay for Performance - Project 2.a.iv



> 3,046,068 1,629,647

Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

	Project Snapshot	Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	DY4, Q2 Payment Available	\$
Project ID	2.b.iv	DY4, Q2 Payment Earned	\$
Project Title	Care transitions intervention patients with a care transition plan developed prior to discharge.		

			2.b.iv 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%			ĺ	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	609,214	609,214	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	609,214	609,214	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	8%	8%	243,685	243,685	
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	2.83	35%	72%	72%	2,193,169	776,747	
	Domain 2 Subtotal		23.00	17.83	78%	80%	80%	2,436,855	1,020,433	
	Total	Complete	29.00	23.83	82%	100%	100%	3,046,068	1,629,647	

Total Project 2.b.iv AVs Awarded: 23.83 out of 29

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

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

	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	Pass & Ongoing	1	
	Enter Reviewer Comment						
Total						1.00	

	Domain 1 Project Prescribed Milestones - Project 2.b.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	3/31/2017	3/31/2017	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. 	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	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							

NEW YORK STATE Of Health Medicaid Redesign Team

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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 Reviewer Comment						
	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					0.00		

	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						

Pass & Ongoing

Pass & Ongoing

Pass & Ongoing

0.25

0.25

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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	
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	
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

Enter Reviewer Comment

Enter Reviewer Comment

Save & Return Print

Children's Access to Primary Care- 12 to 24 months

Medicaid Spending on ER and Inpatient Services ±

Medicaid spending on Primary Care and community based behavioral health care

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

NEW YORK STATE Department Medicaid Redesign Team of Health

		i uss & 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	
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Pass & Ongoing	
	Enter Reviewer Comment		



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NEW YORK STATE

Department of Health Medicaid Redesign Team

PDI 90– Composite of all measures +/-

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

Westchester Medical Center - Project 2.b.iv

Pass & Ongoing

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NEW YORK STATE Department of Health Medicaid Redesign Team Save & Return Print			New York State Departme n Incentive Payment (DSR		
		Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.b.iv			
	Primary Care - Usual Source of Care - Q2		Pass & Ongoing	0.5	
	Enter Reviewer Comment				
Total					

Domain 2 Pay for Performance - Project 2.b.iv



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

Westchester Medical Center - Project 2.d.i

 Project Snapshot

 Project Domain
 System Transformation Projects (Domain 2)

 Project ID
 2.d.i

 Project Title
 Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into

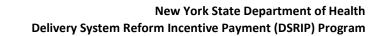
	Payment Snapshot	
1	DY4, Q2 Payment Available	\$ 3,526,498
1	DY4, Q2 Payment Earned	\$ 2,774,178

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

	2.d.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%	705,300	587,750		
	Patient Engagement Speed	Complete	1.00	0.00	0%]					
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	705,300	587,750		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	8%	8%	282,120	282,120		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	4.00	3.00	75%	72%	72%	2,539,078	1,904,309		
	Domain 2 Subtotal			7.00	88%	80%	80%	2,821,198	2,186,429		
	Total Complete				86%	100%	100%	3,526,498	2,774,178		
		T 1 1 0			10 1 (1 4						

Total Project 2.d.i AVs Awarded: 12 out of 14

	Domain 1 Project Milestones - Project 2.d.i								
AV Driving	Project Requirement and Metric/Deliverable	Required Committed		Milestone	Reviewer Status	AVs			
	rojett nequirement and wether beiverable	Due Date	Due Date	Status	neviewei status	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) Westchester Medical Center - Project 2.d.i

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

	Domain 1 Project Prescribed N	1ilestones - P	roject 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	N/A		
	Enter Revie	wer Commen	nt					
	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	N/A		
	Enter Reviewer Comment							
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	 Survey the targeted population about healthcare needs in the PPS' region. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					

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	Print			West	chester Medical Center -	Project 2.d.i		
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		wer Commer	ot					
	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	ot					
•	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 improvement, must be set for each cohort at the beginning of each performance period.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	9. Measure PAM [®] components	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					
	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	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	N/A		



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Enter Reviewer Comment							
12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Revie	wer Commer	ot					
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	N/A		
Enter Revie	wer Commer	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	N/A		
Enter Reviewer Comment							
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	N/A		
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	N/A		
Enter Revie	wer Commer	nt					
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	N/A		
Enter Revie	wer Commer	nt					
Total					0.00		

Domain 2 Pay for Reporting - Project 2.d.i



	Print	chester Medical Center -	Project 2.d.i
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		
	PAM Level	Pass & Ongoing	1
	Enter Reviewer Comment		
	Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		4.00

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.d.i

Domain 2 Pay for Performance - Project 2.d.i

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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 2.d.i

AV Driving	Measure	Reviewer Status	Avs
	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		
	PAM Level	Pass & Ongoing	1
	Enter Reviewer Comment		
	Use of primary and preventive care services Percent of attributed Medicaid members with no claims history	Fail	0
	Enter Reviewer Comment		
	Total		3.00

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

Westchester Medical Center - 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

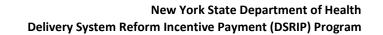
	Payment Snapshot	
1	DY4, Q2 Payment Available	\$ 2,731,147
1	DY4, Q2 Payment Earned	\$ 1,229,016

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

	3.a.i Scoresheet										
Domain	Component	oonent Review Status AVs Net AVs Percentage Funding % Available Awarded AV (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%	546,229	546,229		
	Patient Engagement Speed	Complete	1.00	1.00	100%						
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	546,229	546,229		
Demain 2	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	273,115	273,115		
Domain 3	Domain 3 Pay for Performance	Complete	7.00	1.50	21%	70%	70%	1,911,803	409,672		
	Domain 3 Subtotal			3.50	39%	80%	80%	2,184,918	682,787		
	Total Complete				63%	100%	100%	2,731,147	1,229,016		

Total Project 3.a.i AVs Awarded: 9.5 out of 15

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



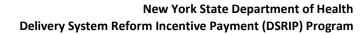
NEW YORK STATE Of Health Medicaid Redesign Team

> Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.a.i

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

		Domain 1 Project Prescribed Milestones	- Project 3.a	a.i Models 1,	2 and 3				
	🗹 3.a.i Model 1 🗌 3.a.i Model 2 🗌 3.a.i Model 3								
AV Driving Project Requirement and Metric/Deliverable Required Committed Milestone Reviewer Status A									
		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	Pass & Complete	N/A		
		Enter Reviewer Comment							
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	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		
		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		







Department of Health Medicaid Redesign Team

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Enter Reviewer Comment	
Total	0

	Domain 3 Pay for Reporting						
AV Driving	Measure	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				
	P4R Measure DY3Q4						
	Total		2.00				

	Domain 3 Pay for Performance					
AV Driving	Measure	Reviewer Status	Avs			
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0			
	P4P Measure DY3Q4					
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0			
	P4P Measure DY3Q4					
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5			
	P4P Measure DY3Q4					
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A			
	P4P Measure DY3Q4					
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0			



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	P4P Measure DY3Q4				
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0		
	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					



Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

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

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,621,036
DY4, Q2 Payment Earned	\$ 1,179,466

	3.a.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%	524,207	524,207	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	524,207	524,207	
Demain 2	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	262,104	262,104	
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	7.00	1.50	21%	70%	70%	1,834,725	393,155	
	Domain 2 Subtotal			3.50	39%	80%	80%	2,096,829	655,259	
Total Complete		15.00	9.50	63%	100%	100%	2,621,036	1,179,466		

Total Project 3.a.ii AVs Awarded: 9.5 out of 15

	Domain 1 Project Milestones - Project 3.a.ii							
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed	Milestone	Reviewer Status	AVs		
AT BITTING	rojett nequirement and methop benverable		Due Date	Status		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	Completed	Pass & Ongoing	1
	Enter Reviewer Comment					
Total						1.00

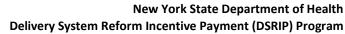
	Domain 1 Project Prescribed M	lilestones - P	roject 3.a.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	t			
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	 Develop written treatment protocols with consensus from participating providers and facilities. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A



Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

	Enter Reviewer Comment					
	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	nt			
	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	nt			
•	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	11. 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 Reporting



Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

AV Driving	Measure	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	
	P4R Measure DY3Q4			
Total				

	Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0				
	P4P Measure DY3Q4						
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0				
	P4P Measure DY3Q4						
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5				
	P4P Measure DY3Q4						



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	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A				
	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	Fail	0				
	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 1.50							
Total							

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

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Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.c.i

	Project Snapshot	Payment Snapsho	ot	
Project Domain	Clinical Improvement Projects (Domain 3)	DY4, Q2 Payment Available	\$	637,549
Project ID	3.c.i	DY4, Q2 Payment Earned	\$	637,549
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 % (DY4)	Domain Funding % (DY4, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	67%	425,033	425,033
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
Domain 1 Subtotal			6.00	6.00	100%	20%	67%	425,033	425,033
Demain 2	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	33%	212,516	212,516
Domain 3	Domain 3 Pay for Performance (P4P)		0.00	0.00	N/A	70%	0%	-	-
Domain 2 Subtotal		6.00	6.00	100%	80%	33%	212,516	212,516	
Total Complete		12.00	12.00	100%	100%	100%	637,549	637,549	

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

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

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.c.i

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							

	Domain 1 Project Prescribed Milestones - Project 3.c.i							
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Commer	ıt						
	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	N/A			
	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	N/A			
	Enter Reviewer Commer	nt						
	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	N/A			
	Enter Reviewer Comment							
	5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	Completed	Pass & Complete	N/A			

Department of Health Medicaid Redesign Team

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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.c.i

Enter Reviewer Comment							
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment							
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of	2/21/2017	Completed	Fail	NI / A			
Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2017	Completed	Fdii	N/A			
Enter Reviewer Comment							
Total							

	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%) ±	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333					



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

Westchester Medical Center - Project 3.c.i Print P4R Measure in DY3Q4 Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication Pass & Ongoing 0.3333333 P4R Measure in DY3Q4 Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies Pass & Ongoing 0.3333333 P4R Measure in DY3Q4 Pass & Ongoing Prevention Quality Indicator # 1 (DM Short term complication) ± 1 P4R Measure in DY3Q4 Total 6.00



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Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.d.iii

	Project Snapshot
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.d.iii
Project Title	Implementation of evidence-based medicine guidelines for asthma management

Payment Snapshot	
DY4, Q2 Payment Available	\$ 2,196,003
DY4, Q2 Payment Earned	\$ 1,427,402

			3.d.iii 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%			439,201	439,201
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%		
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	439,201	439,201
Demain 2	Domain 3 Pay for Reporting (P4R)	Comulato	4.00	4.00	100%	10%	10%	219,600	219,600
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	2.00	1.00	50%	70%	70%	1,537,202	768,601
Domain 2 Subtotal		6.00	5.00	83%	80%	80%	1,756,802	988,201	
Total Complete		12.00	11.00	92%	100%	100%	2,196,003	1,427,402	

Total Project 3.d.iii AVs Awarded: 11 out of 12

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.d.iii

	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00	
	Enter Revie	Enter Reviewer Comment					
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1	
	Enter Revie	wer Commen	t				
Total							

	Domain 1 Project Prescribed M	ilestones - Pr	oject 3.d.iii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	 Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Revie	wer Commen	t						
	 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Revie	wer Commen	t						
	4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 3.d.iii

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5. 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						

	Domain 3 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				
	P4R Measure DY3Q4						
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1				
P4R Measure DY3Q4							
	Total		4.00				

	Domain 3 Pay for Performance							
AV Driving	V Driving Measure Reviewer Status							
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1					
	P4P Measure DY3Q4							
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Fail	0					
	P4P Measure DY3Q4							
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Fail	0					
	P4P Measure DY3Q4							
	Total							



Save & Return Print Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 4.b.i

Project Snapshot					
Project Domain Domain 4: Population-wide Projects: New York's					
Project ID 4.b.i					
	Promote Tobacco Use Cessation, especially among				
Project Title	low SES populations and those with poor mental				
	health				

Payment Snapshot	
DY4, Q2 Payment Available	\$ 1,629,292
DY4, Q2 Payment Earned	\$ 1,629,292

4.b.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%	325,858	325,858
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	325,858	325,858
Demain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	80%	80%	1,303,434	1,303,434
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		17.00	17.00	100%	80%	80%	1,303,434	1,303,434
	Total Complete			22.00	100%	100%	100%	1,629,292	1,629,292

Total Project 4.b.i AVs Awarded: 22 out of 22

Hide Reviewer Comments

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY2)						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1				
	Enter Reviewer Comment						

Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 4.b.i

ercentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
ercentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to /hite non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- ispanics	Pass & Ongoing	1
Enter Reviewer Comment		
ercentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		
ge-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
ercentage of adults who are obese	Pass & Ongoing	1
Enter Reviewer Comment		
	Enter Reviewer Comment ercentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to hite non-Hispanics Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to hite non-Hispanics Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-spanics Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-spanics Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-spanics Enter Reviewer Comment recentage of adults with health insurance - Aged 18- 64 years Enter Reviewer Comment ge-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Enter Reviewer Comment recentage of adults who are obese	Enter Reviewer Comment rcentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Pass & Ongoing Enter Reviewer Comment ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to Pass & Ongoing Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics to White non-Hispanics - Enter Reviewer Comment Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Spanics - Enter Reviewer Comment Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Spanics - Enter Reviewer Comment Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Spanics - Enter Reviewer Comment Pass & Ongoing ge-adjusted preventable hospitalizations rate per 10,000 - Aged 18- 64 years Pass & Ongoing ge-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Pass & Ongoing enter Reviewer Comment Enter Reviewer Comment Pass & Ongoing <td< th=""></td<>

STATE Department Medicaid of Health Redesign Team

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Save & Return Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - Sep Print	ptember 30, 2018 (Payme tchester Medical Center -	-
Percentage of children and adolescents who are obese	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of cigarette smoking among adults	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		
Asthma emergency department visit rate per 10,000	Pass & Ongoing	1
Enter Reviewer Comment		



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

75 years		
Enter Reviewer Comment		
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		
Age-adjusted heart attack hospitalization rate per 10,000	Pass & Ongoing	1
Enter Reviewer Comment		
Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years	Pass & Ongoing	1
Enter Reviewer Comment		
Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
Total		17.00



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

Westchester Medical Center - Project 4.b.ii

 Project Snapshot

 Project Domain
 Domain 4: Population-wide Projects: New York's

 Project ID
 4.b.ii

 Project Title
 Increase Access to High Quality Chronic Disease

 Project Title
 Preventive Care and Management in Both Clinical and Community Settings

Payment S	napshot	
DY4, Q2 Payment Available	\$	1,204,260
DY4, Q2 Payment Earned	\$	1,204,260

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

4.b.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%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20% 20%	240,852	240,852	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	240,852	240,852	
Demain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	80%	80%	963,408	963,408	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal		17.00	17.00	100%	80%	80%	963,408	963,408	
	Total Complete				100%	100%	100%	1,204,260	1,204,260	

Total Project 4.b.ii AVs Awarded: 22 out of 22

Hide Reviewer Comments

	Domain 4 Pay for Performance and Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1				
	Enter Reviewer Comment						



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Achievement Value (AV) Scorecard DY4, Q2 July 1, 2018 - September 30, 2018 (Payment Quarter) Westchester Medical Center - Project 4.b.ii

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 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	·			
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1		
Enter Reviewer Comment				
Percentage of adults with health insurance - Aged 18- 64 years	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				
Percentage of adults who are obese	Pass & Ongoing	1		
Enter Reviewer Comment				
Percentage of children and adolescents who are obese	Pass & Ongoing	1		



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	Enter Reviewer Comment		
	Percentage of cigarette smoking among adults		1
	Enter Reviewer Comment		
	Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Aged 50- 75 years		1
	Enter Reviewer Comment		
	Asthma emergency department visit rate per 10,000		1
	Enter Reviewer Comment		
	Asthma emergency department visit rate per 10,000 - Aged 0-4 years		1
	Enter Reviewer Comment		
	Age-adjusted heart attack hospitalization rate per 10,000		1
	Enter Reviewer Comment		
Rate of hospitalizations for sho	Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6- 17 years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		17.00