

#### Achievement Value (AV) Scorecard Central New York Care Collaborative, Inc.

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	Project lisk (edits on the purple final better or access each individual project report)  Dominani-Organizational fold Projectal  AV Adjustments (column 1)  2 at  2 at  2 at  3 av  2 at  3 av  3 av  4 by  4 by  5 av  Frint  Print
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 Central New York Care Collaborative, Inc.

PPS Information					
Quarter	DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)				
PPS	Central New York Care Collaborative, Inc.				
PPS Number	8				

Achiev	ement Value (	(AV) Scorecard	d Summary			
		AV [	Data		Payme	nt Data
Project Link (click on the purple link below to access each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY4, Q4 Payment Available	DY4, Q4 Payment Earned
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00	Organization embedded project's	within each
2.a.i	21.00	13.25	0.00	13.25	\$2,555,924	\$1,179,133
2.a.iii	21.00	12.75	0.00	12.75	\$2,099,509	\$ 933,582
2.b.iii	21.00	12.75	0.00	12.75	\$1,962,584	\$ 872,696
2.b.iv	21.00	12.75	0.00	12.75	\$1,961,103	\$ 872,037
2.d.i	13.00	9.75	0.00	9.75	\$1,696,995	\$ 724,051
3.a.i	26.00	19.00	0.00	19.00	\$1,780,018	\$ 973,077
3.a.ii	26.00	19.00	0.00	19.00	\$1,688,735	\$ 923,175
3.b.i	20.00	14.83	0.00	14.83	\$2,224,554	\$1,090,467
3.g.i	16.00	14.00	0.00	14.00	\$1,706,992	\$1,392,370
4.a.iii	16.00	16.00	0.00	16.00	\$ 912,830	\$ 912,830



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Achievement Value (AV) Scorecard Central New York Care Collaborative, Inc.

4.d.i	32.00	32.00	0.00	32.00	\$1,095,396	\$1,095,396
AV Adjustments (Column F)						
Total	233.00	176.08	0.00	176.08	\$19,684,640	\$10,968,814



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Central New York Care Collaborative, Inc. - 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 Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		Workforce Strategy Spending (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing			
Workforce Strategy		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1		
Budget Updates							1		



		Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	Completed	Pass & Complete	
	•	Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	Completed	Pass & Complete	
Additional Vorkforce Strategy	•	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	Completed	Pass & Complete	
Budget  Jpdates  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	N/A
		Develop training strategy	9/30/2016	N/A	Completed	Pass & Complete	
	•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
dditional /orkforce					
trategy 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			

	Section 01 - Budget									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
110010		Module 1.1 - PPS Budget Report (Baseline)		N/A	Completed	Pass & Complete				
O v a mt a ml v		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing				
Quarterly Project										
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1			



Budget and Flow of					
Funds	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing
	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing
		Total			

			Section 02 - Go	overnance			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize governance structure and subcommittee structure	9/30/2015	N/A	Completed	Pass & Complete	
Governance Structure		Establish a clinical governance     structure, including clinical quality     committees for each DSRIP project	12/31/2015	N/A	Completed	Pass & Complete	
Updates							1
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete	
Governance Process	_	Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Update							



1		Terret In the second se					
		5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g.	N/A	N/A	Completed	Pass & Complete	
		schools, churches, homeless services,					
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	Completed	Pass & Complete	
dditional							
Sovernance Milestones non AV- riving)	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	N/A	Completed	Pass & Complete	N/A
iviligj							
		8. Finalize workforce communication and engagement plan	N/A	N/A	Completed	Pass & Complete	
		9. Inclusion of CBOs in PPS Implementation	N/A	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
1							I



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Additional Governance							N/A
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

		Sec	ction 03 - Financia	al Sustainability			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	
		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
Financial		100 ISSUES!					
Stability Update		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete	1



	4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
inancial						
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				



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		2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	9/30/2016	N/A	Completed	Pass & Complete	1	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
Cultural Competency							N/A	
/Health Literacy		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
		Total			

		Sect	tion 05 - IT Systen	ns and Processes	5		
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving		Date	Date	Status	Reviewer Status	AV Awarucu
	•	1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	9/30/2016	N/A	Complete	Pass & Complete	
IT Systems	•	Develop an IT Change Management     Strategy.	9/30/2016	N/A	Complete	Pass & Complete	
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	N/A	N/A	Complete	Pass & Ongoing	
		5. Develop a data security and confidentiality plan.	N/A	N/A	Complete	Pass & Ongoing	



		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
							N/A
Additional IT Systems and		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Processes Topic Areas							
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

Section 06 - Performance Reporting								
Process	AV	Milestone	Required Due	<b>Committed Due</b>	Milestone	Reviewer Status	AV Awarded	
Measure	Driving	ivillestorie	Date	Date	Status			
		1. Establish reporting structure for PPS-						
		wide performance reporting and	N/A	N/A	In Process	Pass & Ongoing		
		communication.					N/A	
Performanc								



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		Total				0	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	N/A	
e Reporting Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing		
Additional Performanc							
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing		
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing		
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		
	the network, focused on clinical quality and performance reporting.	IN/A	IN/A	III PIOCESS	rass & Oligoling	N/A	
e Reporting	2. Develop training program for organizations and individuals throughout	N/A	N/A	In Process	Pass & Ongoing		



Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication	12/31/2015	N/A	Completed	Pass & Complete	
		and engagement plan.		·			
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.	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	
Additional	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Practitioner Engagement Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			1				



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

		Section	n 08 - Population I	Health Managem	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	A
		Develop population health     management roadmap.	N/A	N/A	In Process	Pass & Ongoing	
opulation							
Health		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional opulation							
lealth Topic reas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
<del>-</del>							



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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			

		9	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	Complete	Pass & Complete	N/A
Clinical							IN/A
Integration		2. Develop a Clinical Integration strategy.	N/A	N/A	In Process	Pass & Ongoing	N/A
							IN/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							N/A



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Integration Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IV/A
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0



Save & Return

Print

AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AV	Awarded	Adjusted	Net A	AVs Awarded	
Adjustment		Projects		Net	Percentage	· •	Net	Daveantees 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	178.00	121.08	68%	0.00	121.08	68%	
Total			233.00	176.08	76%	0.00	176.08	76%	

Hid	e Reviewer Comments	☐ Organizational	☐ Project Adjustments					
No AV Adjustments								
		Please note that there are no AV adjustments	for Central New York Care Collaborative, Inc. in DY2, Q1					



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - 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 Snapshot	
DY4, Q4 Payment Available	\$ 2,555,924
DY4, Q4 Payment Earned	\$ 1,179,133

			2.a.i Scores	heet							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%				
Domain 1	Project Implementation Speed	Complete	1.00	0.50	50%			20%	511,185	468,586	
	Patient Engagement Speed	N/A	0.00	0.00	0%						
	Domain 1 Subtotal		6.00	5.50	92%	20%	20%	511,185	468,586		
Damain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	204,474	204,474		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	2.75	28%	72%	72%	1,840,265	506,073		
	Domain 2 Subtotal			7.75	52%	80%	80%	2,044,739	710,547		
	Total Complete			13.25	63%	100%	100%	2,555,924	1,179,133		

Total Project 2.a.i AVs Awarded: 13.25 out of 21

#### **Hide Reviewer Comments**

	Domain 1 Project Milestones Project 2.a.i									
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded				
	Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A		Pass & Ongoing	N/A				
	Enter Revie	wer Commen	nt							
	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.50				



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.a.i

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Enter Reviewer Comment

Total 0.50

	Domain 1 Project Prescribed N	lilestones P	roject 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.	3/31/2019	3/31/2019	Completed	Fail	0.00	
	Enter Revie	wer Commer	rt				
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter 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	



Enter Reviewer Comment								
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2019	3/31/2019	Completed	Fail	0.00			
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	Pass & Complete	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.	3/31/2019	3/31/2019	Completed	Pass & Complete	0.25			
Enter Revie	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	3/31/2019	3/31/2019	Completed	Pass & Complete	0.25			
Enter Revie	wer Commen	t						
Total					0.50			



AV Driving	Measure	Reviewer Status	AVs Awarded
	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		
	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		
	Total		5.00

	Domain 2 Pay for Performance - Project 2.a.i		
<b>AV Driving</b>	Measure	Reviewer Status	Avardad
	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	Fail	0
	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 t	to 24 months	Fail	0
	Enter Reviewer Comment		
Children's Access to Primary Care- 25 r	months to 6 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
Children's Access to Primary Care- 7 to	11 years	Fail	0
	Enter Reviewer Comment		
Children's Access to Primary Care- 12 t	to 19 years	Fail	0
	Enter Reviewer Comment		
Getting Timely Appointments, Care an	d 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 Roon	n Visits	Fail	0
	Enter Reviewer Comment		
Potentially Avoidable Readmissions		Fail	0
,	Enter Reviewer Comment		
PDI 90- Composite of all measures +/-	-	Fail	0
·	Enter Reviewer Comment		
PQI 90 – Composite of all measures +/	- -	Fail	0
	Enter Reviewer Comment		
Primary Care - Length of Relationship -		Fail	0
1 / Edit of Edition of the Indiana.	Enter Reviewer Comment		
Primary Care - Usual Source of Care - C		Pass & Ongoing	0.5
Times y care assurabource or cure to	Enter Reviewer Comment	. add & ongoing	0
	Litter neviewer comment		



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.a.iii

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,099,509
DY4, Q4 Payment Earned	\$ 933,582

	2.a.iii Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)				
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			20%	419,902	349,918			
	Patient Engagement Speed	Complete	1.00	0.00	0%								
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	419,902	349,918				
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	167,961	167,961				
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	2.75	28%	72%	72%	1,511,646	415,703				
	Domain 2 Subtotal			7.75	52%	80%	80%	1,679,607	583,663				
	Total	Complete	21.00	12.75	61%	100%	100%	2,099,509	933,582				

Total Project 2.a.iii AVs Awarded: 12.75 out of 21

#### **Hide Reviewer Comments**

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



Print		Centro	II NEW YORK C	are Collaborative, Inc P	roject 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	Fail	0	
Enter Reviewer Comment						
Total						

	Domain 1 Project Prescribed M	lilestones - Pi	oject 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	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	



	Print		Centro	ıl New York C	are Collaborative, Inc P	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 Revie	wer Commen	nt						
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Revie	wer Commer	nt						
	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Fail	N/A			
	Enter Reviewer Comment								
	9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	Total					0.00			
	Domain 2 Pay for Report	ing Project 2	2.a.iii						
AV Driving	Measure				Reviewer Status	AVs Awarded			



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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		
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		
Total		5.00

	Domain 2 Pay for Performance Project 2.a.iii		
<b>AV Driving</b>	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	Fail	0
	Enter Reviewer Comment		



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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	Fail	0
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	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Fail	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	Fail	C
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Fail	0
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		2.7



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.b.iii

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,962,584
DY4, Q4 Payment Earned	\$ 872,696

	2.b.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	% 20%	392,517	327,097
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	392,517	327,097
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	157,007	157,007
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	2.75	28%	72%	72%	1,413,061	388,592
	Domain 2 Subtotal			7.75	52%	80%	80%	1,570,067	545,598
	Total	Complete	21.00	12.75	61%	100%	100%	1,962,584	872,696

Total Project 2.b.iii AVs Awarded: 12.75 out of 21

#### **Hide Reviewer Comments**

	Domain 1 Project Milesto	nes Project	2.b.iii			
AV Driving	Project Requirement and Metric/Deliverable	Required	Committed	Milestone	Reviewer Status	AVs
Av Dilving		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						



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

	Domain 1 Project Prescribed M	ilestones - Pr	oject 2.b.iii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	care providers with an emphasis on those that are PCMHs and have open access scheduling.  a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3.  b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment  Enter Reviewer Comment						



	Print		Centra	II New York C	are Collaborative, Inc P	roject 2.b.iii
•	care provider:  a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need.  b. Patient navigator will assist the patient with identifying and accessing needed community support resources.  c. Patient navigator will assist the member in receiving a timely	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		wer Commen	t			
	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2017	3/31/2017	Completed	Pass (with Exception) & Complete	N/A
	Enter Revie	wer Commen	t			
	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	Total					0.00

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



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	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		
	Total		5.00

	Domain 2 Pay for Performance Project 2.b.iii			
<b>AV Driving</b>	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	Fail	0	
	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	Fail	0	
	Enter Reviewer Comment			
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25	
	Enter Reviewer Comment			



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	Children's Access to Primary Care- 7 to 11 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	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	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Fail	0
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Fail	0
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Fail	0
	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
	Total		2.75



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.b.iv

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,961,103
DY4, Q4 Payment Earned	\$ 872,037

			2.b.iv Scores	heet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	392,221	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				326,851
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	392,221	326,851
Domain 3	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	156,888	156,888
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	2.75	28%	72%	72%	1,411,995	388,298
	Domain 2 Subtotal			7.75	52%	80%	80%	1,568,883	545,187
	Total Complete			12.75	61%	100%	100%	1,961,103	872,037

Total Project 2.b.iv AVs Awarded: 12.75 out of 21

#### **Hide Reviewer Comments**

	Domain 1 Project Milestones Project 2.b.iv								
AV Driving	Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs			
AV DITVING			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								



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

	Domain 1 Project Prescribed Milestones - Project 2.b.iv								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	Develop standardized protocols for a Care Transitions Intervention     Model with all participating hospitals, partnering with a home care     service or other appropriate community agency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Revie	wer Commen	t						
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2018	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 Revie	wer Commen	t						



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	5. Protocols will include care record transitions with timely updates	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	provided to the members' providers, particularly primary care provider.    3/31/2017   3/31/2017   Completed   1/433 & Complet						
	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	Total						

	Domain 2 Pay for Reporting Project 2.b.iv						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	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						
	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					
Total		5.00			

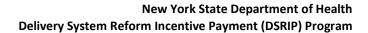
	Domain 2 Pay for Performance Project 2.b.iv		
AV Driving	Measure	Reviewer Status	AVS Awardad
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Fail	0
	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	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	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	Fail	0



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

### Save & Return

Print Central New York C	Care Collaborative, Inc P	roject 2.b.iv
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Fail	0
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		2.75





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.d.i

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

Payment Snaps	hot	
DY4, Q4 Payment Available	\$	1,696,995
DY4, Q4 Payment Earned	\$	724,051

	2.d.i Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	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%	339,399	282,833			
	Patient Engagement Speed	Complete	1.00	0.00	0%							
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	339,399	282,833			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	8%	8%	135,760	135,760			
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	3.00	0.75	25%	72%	72%	1,221,836	305,459			
Domain 2 Subtotal		7.00	4.75	68%	80%	80%	1,357,596	441,219				
Total Complete		13.00	9.75	75%	100%	100%	1,696,995	724,051				

Total Project 2.d.i AVs Awarded: 9.75 out of 13

#### **Hide Reviewer Comments**

Domain 1 Project Milestones Project 2.d.i								
AV Driving	Project Requirement and Metric/Deliverable		Committed	Milestone	Reviewer Status	AVs		
			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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	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Complete	0.00
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	Enter Reviewer Comment					
Total						0.00

	Domain 1 Project Prescribed Milestones - Project 2.d.i							
AV Driving		Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	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							
	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



5. Train providers located within "hot spots" on patient activation	2/24/2040	2/24/2040	Camanlatad	Dans & Campulate	N1/A		
techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along							
with the member's MCO and assigned PCP, reconnect beneficiaries to	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
his/her designated PCP (see outcome measurements in #10).							
Enter Revie	wer Commer	nt					
7. Baseline each beneficiary cohort (per method developed by state) to							
appropriately identify cohorts using PAM® during the first year of the		_ , , , , , , , , , , , ,					
project and again, at set intervals. Baselines, as well as intervals towards	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
improvement, must be set for each cohort at the beginning of each performance period.							
Enter Revie	wer Commen	nt					
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	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2018	3/31/2018	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.	3/31/2018	3/31/2018	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	nt					
13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	Completed	Pass & Complete	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	3/31/2018	3/31/2018	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.	3/31/2018	3/31/2018	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	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
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					0.0		



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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



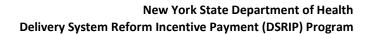
### New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 2.d.i

#### AVS **AV Driving** Measure **Reviewer Status** 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) Fail 0 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 Fail 0 Enter Reviewer Comment PAM Level Please Select N/A 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 0.75





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 3.a.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,780,018
DY4, Q4 Payment Earned	\$ 973,077

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%		356,004	296,670
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%		
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	356,004	296,670
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	178,002	178,002
Domain 3	Domain 3 Pay for Performance	Complete	10.00	4.00	40%	70%	70%	1,246,013	498,405
	Domain 3 Subtotal			14.00	70%	80%	80%	1,424,015	676,407
Total Complete			26.00	19.00	73%	100%	100%	1,780,018	973,077

Total Project 3.a.i AVs Awarded: 19 out of 26

#### Hide Reviewer Comments

	Domain 1 Project Milestones Project 3.a.i								
AV Driving	Project Requirement and Metric/Deliverable	Required	Required Committed		Reviewer Status	AVs			
		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								

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

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

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3								
	☑ 3.a.i Model 1 ☑ 3.a.i Model 2 ☐ 3.a.i Model 3								
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
		1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment							
		Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
3.a.i Model 1		Enter Reviewer Comment							
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Pass & Complete	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		



		Ent	Enter Reviewer Comment								
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A				
		Ent	ter Reviewer	Comment							
		6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
		Enter Reviewer Comment									
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A				
		Ent	ter Reviewer	Comment							
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
		Ent	ter Reviewer	Comment							
		Total					0				

	Domain 3 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5



Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
		-



Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Total		10

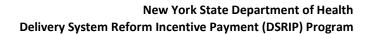
	Domain 3 Pay for Performance		
<b>AV Driving</b>	Measure	Reviewer Status	AVS
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Fail	0
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0



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

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Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Fail	0
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Total		4





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 3.a.ii

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

Payment Snapsh	ot	
DY4, Q4 Payment Available	\$	1,688,735
DY4, Q4 Payment Earned	\$	923,175

	3.a.ii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	337,747	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				281,456
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	337,747	281,456
Domain 3	Domain 3 Pay for Reporting (P4R)	Commista	10.00	10.00	100%	10%	10%	168,874	168,874
Doinain 3	Domain 3 Pay for Performance (P4P)	Complete	10.00	4.00	40%	70%	70%	1,182,115	472,846
Domain 2 Subtotal			20.00	14.00	70%	80%	80%	1,350,988	641,719
	Total	Complete	26.00	19.00	73%	100%	100%	1,688,735	923,175

Total Project 3.a.ii AVs Awarded: 19 out of 26

#### Hide Reviewer Comments

	Domain 1 Project Milestones Project 3.a.ii						
AV Driving	Project Requirement and Metric/Deliverable	Required 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						



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	Fail	0	
Enter Reviewer Comment						
Total					0.00	

	Domain 1 Project Prescribed N	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	nt				
	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 Revie	wer Commer	nt				
	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						
	4. 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	



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 3.a.ii

	Enter Povice	wer Commer	·+				
	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	Fail	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 Revie	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 Revie	wer Commer	nt				
	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 Revie	wer Commer	nt				
	Total						

#### **Domain 3 Pay for Reporting**



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AV Driving	Measure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5



Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Total		10

	Domain 3 Pay for Performance					
AV Driving	Measure	Reviewer Status	Avorded			
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1			
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0			
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0			



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

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Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Fail	0
Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
		-
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Fail	0
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
		_
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Total		4



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 3.b.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,224,554
DY4, Q4 Payment Earned	\$ 1,090,467

			3.b.i Scores	heet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	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% 12%	261,712	218,093	
	Patient Engagement Speed	Complete	1.00	0.00	0%					
	Domain 1 Subtotal		6.00	5.00	83%	20%	12%	261,712	218,093	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	10%	6%	130,856	130,856	
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	7.00	2.83	40%	70%	82%	1,831,985	741,518	
	Domain 2 Subtotal			9.83	70%	80%	88%	1,962,841	872,374	
	Total	Complete	20.00	14.83	74%	100%	100%	2,224,554	1,090,467	

Total Project 3.b.i AVs Awarded: 14.83 out of 20

#### **Hide Reviewer Comments**

	Domain 1 Project Milestones Project 3.b.i								
AV Driving	Project Requirement and Metric/Deliverable	Required 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 Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0	
	Enter Reviewer Comment						
Total						0.00	

	Domain 1 Project Prescribed N	lilestones - P	roject 3.b.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	t					
•	2. Ensure that all PPS safety net providers are actively connected to EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up, by the end of DY 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



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5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



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



Enter Reviewer Comment	
Total	0.00

	Domain 3 Pay for Performance and Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Controlling High Blood Pressure	Pass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
	Health Literacy - Easy to Understand Instructions	Pass & Ongoing	0.3333333
	Health Literacy - Describing How to Follow Instructions	Pass & Ongoing	0.3333333
	Health Literacy - Explained What to do if Illness Got Worse	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333



Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy	Pass & Ongoing	0.5
Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%	Pass & Ongoing	0.5
Prevention Quality Indicator # 8 (Heart Failure) ±	Pass & Ongoing	1
Prevention Quality Indicator # 7 (HTN) ±	Pass & Ongoing	1
 7-1-1		7.00
Total		7.00

Domain 3 Pay for Performance and Pay for Reporting						
<b>AV Driving</b>	Measure	Reviewer Status	AVS Awardad			
	Prevention Quality Indicator # 7 (HTN) ±	Fail	0			
	Prevention Quality Indicator # 8 (Heart Failure) ±	Fail	0			
	Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy	Pass & Ongoing	0.5			



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	Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80%	Fail	0			
		<del></del>				
	Controlling High Blood Pressure	Pass & Ongoing	1			
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Fail	0			
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333			
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Fail	0			
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1			
	Health Literacy - Easy to Understand Instructions	Fail	0			
	Health Literacy - Describing How to Follow Instructions	Fail	0			
	Health Literacy - Explained What to do if Illness Got Worse	Fail	0			
Total						





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 3.g.i

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

Payment Snapshot	t	
DY4, Q4 Payment Available	\$	1,706,992
DY4, Q4 Payment Earned	\$	1,392,370

3.g.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%		200,823	167,352
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		12%		
	Patient Engagement Speed	Complete	1.00	0.00	0%				
Domain 1 Subtotal		6.00	5.00	83%	20%	12%	200,823	167,352	
Damain 2	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	6%	100,411	100,411
Domain 3	Domain 3 Pay for Performance (P4P)	Complete	5.00	4.00	80%	70%	82%	1,405,758	1,124,606
Domain 2 Subtotal		10.00	9.00	90%	80%	88%	1,506,169	1,225,018	
Total Complete		16.00	14.00	88%	100%	100%	1,706,992	1,392,370	

Total Project 3.g.i AVs Awarded: 14 out of 16

#### **Hide Reviewer Comments**

Domain 1 Project Milestones Project 3.g.i							
AV Driving	Project Requirement and Metric/Deliverable		uired Committed Milestone		Reviewer Status	AVs	
	113,531 134,551 131 131 131 131 131 131 131 131 131	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	3/17/2017	N/A	Completed	Pass & Ongoing	0.00	
Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0	
Enter Reviewer Comment						
Total					0.00	

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



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

Domain 3 Pay for Reporting				
AV Driving	Measure	Reviewer Status	AVs Awarded	
	Percentage of patients indicating need who were offered or provided an intervention for pain symptoms experienced during the past week	Pass & Ongoing	1	
	Percentage of patients indicating need who were offered or provided an intervention for physical symptoms (other than pain) experienced during the past week	Pass & Ongoing	1	
	Percentage of patients indicating need who were offered or provided an intervention for not feeling at peace during the past week	Pass & Ongoing	1	
	Percentage of patients indicating need who were offered or provided an interventio for depressive feelings experienced during the past week	Pass & Ongoing	1	
	Percentage of patients who were offered or provided an intervention when there was no advance directive in place	Pass & Ongoing	1	
	Total		5.00	

	Domain 3 Pay for Performance		
AV Driving	Measure	Reviewer Status	



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Print Central New York	Care Collaborative, Inc	Project 3.g.i
Percentage of patients indicating need who were offered or provided an intervention for pain symptoms experienced during the past week	Pass & Ongoing	1
Percentage of patients indicating need who were offered or provided an intervention for physical symptoms (other than pain) experienced during the past week	Fail	0
Percentage of patients indicating need who were offered or provided an intervention for not feeling at peace during the past week	Pass & Ongoing	1
Percentage of patients indicating need who were offered or provided an interventio for depressive feelings experienced during the past week	Pass & Ongoing	1
Percentage of patients who were offered or provided an intervention when there was no advance directive in place	Pass & Ongoing	1
Total		4.00





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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 4.a.iii

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 912,830
DY4, Q4 Payment Earned	\$ 912,830

	4.a.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	182,566	182,566
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	182,566	182,566
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	730,264	730,264
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			11.00	11.00	100%	80%	80%	730,264	730,264
	Total	Complete	16.00	16.00	100%	100%	100%	912,830	912,830

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

#### **Hide Reviewer Comments**

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



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Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1



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



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Central New York Care Collaborative, Inc. - Project 4.d.i

Project Snapshot			
Project Domain	Domain 4: Population-wide Projects: New York's		
Project ID	4.d.i		
Project Title	Reduce Premature Births		

Payment Snapshot	
DY4, Q4 Payment Available	\$ 1,095,396
DY4, Q4 Payment Earned	\$ 1,095,396

	4.d.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	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%	219,079	219,079	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
Domain 1 Subtotal		5.00	5.00	100%	20%	20%	219,079	219,079		
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	27.00	27.00	100%	80%	80%	876,317	876,317	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			27.00	100%	80%	80%	876,317	876,317	
Total Complete		32.00	32.00	100%	100%	100%	1,095,396	1,095,396		

Total Project 4.d.i AVs Awarded: 32 out of 32

#### **Hide Reviewer Comments**

	Domain 4 Pay for Performance and Pay for Reporting - Project 4.d.i (all Milestones are P4R in DY2)					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years	Pass & Ongoing	1			
	Enter Reviewer Comment					



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Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years – Ratio of Black non-Hispanics to White nonHispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Adolescent pregnancy rate per 1,000 females - Aged 15- 17 years—Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Enter Reviewer Comment		
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		
Maternal mortality rate per 100,000 births	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
Enter Reviewer Comment		



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	Percentage of children with any kind of health insurance - Aged under 19 years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of infants exclusively breastfed in the hospital	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of infants exclusively breastfed in the hospital – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of infants exclusively breastfed in the hospital – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of infants exclusively breastfed in the hospital – Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of live births that occur within 24 months of a previous pregnancy	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		



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Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of preterm births	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of preterm births – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of preterm births – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of preterm births – Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of unintended pregnancy among live births	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of unintended pregnancy among live births – Ratio of Black nonHispanics to White nonHispanics	Pass & Ongoing	1
Enter Reviewer Comment		
Percentage of unintended pregnancy among live births—Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
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•	Percentage of unintended pregnancy among live births—Ratio of Medicaid births to non-Medicaid births	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of women with health coverage - Aged 18-64 years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		27.00