

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

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

	Functionality	
Step	Description/Link	Image
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Link (click on the purple fink below to access each individual project report) Domain I: Organizational [All Projects] AV Adjustments (column 1) 2 a 1 2 a 11 2 a 11
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



Print Summary

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

	PPS Information					
Quarter	DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)					
PPS	Staten Island Performing Provider System, LLC					
PPS Number	43					

Achievement Value (AV) Scorecard Summary									
Project Link (click on the purple link below to access		AV [Data		Payment Data				
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY5, Q2 Payment Available	DY5, Q2 Payment Earned			
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment			
2.a.iii	20.00	12.25	0.00	12.25	\$ 1,787,526	\$ 499,167			
2.b.iv	20.00	12.25	0.00	12.25	\$ 1,701,541	\$ 475,155			
2.b.vii	20.00	12.25	0.00	12.25	\$ 1,583,257	\$ 442,125			
2.b.viii	20.00	12.25	0.00	12.25	\$ 1,763,650	\$ 492,499			
2.d.i	13.00	11.09	0.00	11.09	\$ 1,512,651	\$ 841,494			
3.a.i	25.00	17.50	0.00	17.50	\$ 1,512,052	\$ 491,417			
3.a.iv	25.00	17.50	0.00	17.50	\$ 1,447,243	\$ 470,354			
3.c.i	17.00	16.33	0.00	16.33	\$ 1,194,735	\$ 1,075,261			
3.g.ii	14.00	14.00	0.00	14.00	\$ 1,037,596	\$ 1,037,596			



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

4.a.iii	16.00	16.00	0.00	16.00	\$ 847,094	\$ 847,094
4.b.ii	22.00	22.00	0.00	22.00	\$ 720,030	\$ 720,030
AV Adjustments (Column F)						
Total	212.00	163.42	0.00	163.42	\$ 15,107,375	\$ 7,392,191





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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



	Prin	t	9	Staten Island Pe	erforming Provid	der System, LLC - Domain 1 Orgo
		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	N/A	N/A	In Process	Pass & Ongoing
Additional Workforce Strategy	•	Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing
Budget 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
		Develop training strategy	3/31/2016	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



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	Prin						
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce Strategy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
Topic Areas	•						
	•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

	Section 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				



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

	Section 02 - Governance							
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		
		2. Establish a clinical governance						
Governance		structure, including clinical quality	12/31/2016	N/A	Completed	Pass & Complete		
Structure		committees for each DSRIP project						



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Updates						
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete
Sovernance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete
Ipdate						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	12/31/2015	N/A	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	In Process	Pass & Ongoing
dditional -						
Governance Milestones non AV- Iriving)	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	3/31/2016	N/A	Completed	Pass & Complete
urivirig)						
		8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete



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	9. Inclusion of CBOs in PPS Implementation	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	N/A
Additional Governance						
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



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete	
		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete	
Financial							
Stability Update		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	



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

	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).	6/30/2016	N/A	Completed	Pass & Complete	1		



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Additional Cultural Competency		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
/Health Literacy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
-	•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	•	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

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



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	•	1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	9/30/2015	N/A	Complete	Pass & Complete	
		Develop an IT Change Management Strategy.	3/31/2016	N/A	Complete	Pass & Complete	
Γ Systems nd rocesses		Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2015	N/A	Complete	Pass & Complete	N//
		Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2015	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	12/31/2015	N/A	Complete	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



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Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							NA
Topic Arcus		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
,							
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

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



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	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	<u> </u>					
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
1100	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional erformanc						N/A
Reporting 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				0

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



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	_						
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.	3/31/2016	N/A	Complete	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
					'		
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner							NI / A
Engagement Fopic 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	



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

Total 0

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



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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			

			Section 09 - Clinic	al Integration			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Perform a clinical integration 'needs assessment'. 	12/31/2015	N/A	Completed	Pass & Complete	N/A
Clinical Integration							N/A N/A
		2. Develop a Clinical Integration strategy.	3/31/2016	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	



Save & Return

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Additional Clinical Integration 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												



Save & Return

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AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	AVs Awarded Percentage AV 100%
Adjustment	Project	Projects	Available	Net	Percentage		Net	Dorcontago 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	157.00	108.42	69%	0.00	108.42	69%
Total			212.00	163.42	77%	0.00	163.42	77%

Hid	e Reviewer Comments	Organizational	Project Adjustments					
	No AV Adjustments							
	Please note that there are no AV adjustments for Staten Island Performing Provider System, LLC in DY2, Q1							



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,787,526
DY5, Q2 Payment Earned	\$ 499,167

			2.a.iii Score	esheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%	0%	-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	125,127	125,127
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	2.25	23%	93%	93%	1,662,399	374,040
	Domain 2 Subtotal			7.25	48%	100%	100%	1,787,526	499,167
	Total Complete			12.25	61%	100%	100%	1,787,526	499,167

Total Project 2.a.iii AVs Awarded: 12.25 out of 20

Hide Reviewer Comments

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



[:	Print								
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A			
	Enter Reviewer Comment								
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A			
	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 Reviewer Comment								
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	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							



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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		
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 Rev	viewer Comme	ent					
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 & Ongoing	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 & Ongoing	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		



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	Domain 2 Pay for Reporting							
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							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0					
	Enter Reviewer Comment							
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0					



Print	ing Provider System, LLC -	•
Enter Reviewer Comment		
Adult Access to Preventive or Ambulatory Care - 65 and older	Fail	
Enter Reviewer Comment		
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Fail	
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Fail	
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 24 months	Fail	
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	Fail	
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Fail	
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Pass & Ongoing	
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Pass & Ongoing	
Enter Reviewer Comment	- "	
Primary Care - Length of Relationship - Q3	Fail	
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Fail	
Enter Reviewer Comment		
Total		



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - 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	
DY5, Q2 Payment Available	\$ 1,701,541
DY5, Q2 Payment Earned	\$ 475,155

	2.b.iv Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%					
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%	0%	0% 0%	-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%					
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	119,108	119,108	
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	2.25	23%	93%	93%	1,582,433	356,047	
	Domain 2 Subtotal			7.25	48%	100%	100%	1,701,541	475,155	
	Total	Complete	20.00	12.25	61%	100%	100%	1,701,541	475,155	

Total Project 2.b.iv AVs Awarded: 12.25 out of 20

Hide Reviewer Comments

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



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	Module 2 - Project Implementation Speed	9/30/2016	9/30/2016	Completed	Please Select	N/A	
	Enter Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A	
	Enter Reviewer Comment						
Total						0.00	

	Domain 1 Project Prescribed I	Milestones - F	Project 2.b.iv					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	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.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure required social services participate in the project.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	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.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		



Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)
Staten Island Performing Provider System, LLC - Project 2.b.iv

Print								
	Enter Reviewer Comment							
	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Rev	iewer Comme	nt					
	6. Ensure that a 30-day transition of care period is established.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	7. Use EHRs and other technical platforms to track all patients engaged in the project.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
Total								

	Domain 2 Pay for Reporting					
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	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	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Total		5.00			

Domain 2 Pay for Performance



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AV Driving	Measure	Reviewer Status	AVs Awarded
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	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		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Fail	0
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Fail	0



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Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Fail	0
Enter Reviewer Comment		
Total		2.25



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

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

	Project Snapshot					
Project Domain System Transformation Projects (Domain 2)						
Project ID 2.b.vii						
Project Title	Implementing the INTERACT project (inpatient transfer avoidance program for SNF)					

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,583,257
DY5, Q2 Payment Earned	\$ 442,125

	2.b.vii Scoresheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)								
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%											
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-								
	Patient Engagement Speed	N/A	N/A	N/A	0%												
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-								
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	110,828	110,828								
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	2.25	23%	93%	93%	1,472,429	331,297								
	Domain 2 Subtotal			7.25	48%	100%	100%	1,583,257	442,125								
	Total	Complete	20.00	12.25	61%	100%	100%	1,583,257	442,125								

Total Project 2.b.vii AVs Awarded: 12.25 out of 20

Hide Reviewer Comments

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



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Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A
Enter Reviewer Comment					
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A
Enter Reviewer Comment					
Total					

	Domain 1 Project Prescribed N	/lilestones - P	roject 2.b.vii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
	Enter Rev.	iewer Comme	nt				
	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	4. Educate all staff on care pathways and INTERACT principles.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



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	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Rev	iewer Comme	ent				
	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	9/30/2017	9/30/2017	Completed	Fail	N/A	
	Enter Reviewer Comment						
	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment							
	Total						

Domain 2 Pay for Reporting						
AV Driving	AV Driving Measure Reviewer Sta					
	Medicaid Spending on ER and Inpatient Services ±		1			
	Enter Reviewer Comment					



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	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	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	Pass & Ongoing	1
	Enter Reviewer Comment		
Total			

	Domain 2 Pay for Performance		
AV Driving	Measure	Reviewer Status	AVs Awarded
	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	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	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		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
	Enter Reviewer Comment		



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	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 +/-	Pass & Ongoing	1	
	Enter Reviewer Comment			
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1	
	Enter Reviewer Comment			
	Primary Care - Length of Relationship - Q3	Fail	0	
	Enter Reviewer Comment			
	Primary Care - Usual Source of Care - Q2	Fail	0	
	Enter Reviewer Comment			
Total				



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

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

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

Payment Snapshot					
DY5, Q2 Payment Available	\$	1,763,650			
DY5, Q2 Payment Earned	\$	492,499			

2.b.viii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%		
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal			5.00	100%	0%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	123,456	123,456
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	2.25	23%	93%	93%	1,640,195	369,044
	Domain 2 Subtotal			7.25	48%	100%	100%	1,763,650	492,499
Total Complete		20.00	12.25	61%	100%	100%	1,763,650	492,499	

Total Project 2.b.viii AVs Awarded: 12.25 out of 20

Hide Reviewer Comments

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



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Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A	
Enter Rev	iewer Comme	ent				
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A	
Enter Reviewer Comment						
Total						

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



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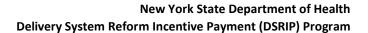
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4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Rev	iewer Comme	ent						
5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting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



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

	Domain 2 Pay for Reporting		
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	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	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		5.00

	Domain 2 Pay for Performance							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0					
	Enter Reviewer Comment							





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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	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Fail	0
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		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Fail	0
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Fail	0
Enter Reviewer Comment		-
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Fail	0
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Fail	0
Enter Reviewer Comment		



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

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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

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

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Total 2.25



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - Project 2.d.i

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,512,651
DY5, Q2 Payment Earned	\$ 841,494

			2.d.i Score	sheet							
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)		
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%					
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-		
	Patient Engagement Speed	N/A	N/A	N/A	0%						
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	7%	7%	105,886	105,886		
Domain 2	Domain 2 Pay for Performance (P4P	Complete	4.00	2.09	52%	93%	93%	1,406,766	735,608		
	Domain 2 Subtotal			6.09	76%	100%	100%	1,512,651	841,494		
	Total Complete			11.09	85%	100%	100%	1,512,651	841,494		

Total Project 2.d.i AVs Awarded: 11.09 out of 13

Hide Reviewer Comments

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

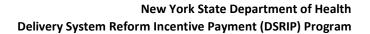


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Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A	
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A	
Enter Reviewer Comment						
Total						

	Domain 1 Project Prescribed Milestones - Project 2.d.i							
AV Driving	Project Requirement and Metric/Deliverable	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.	3/31/2017	3/31/2017	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		

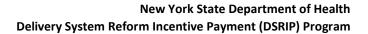


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	Enter Reviewer Comment							
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Rev	iewer Comme	ent					
	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	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Rev	iewer Comme	ent					
•	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 Reviewer Comment							
	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							





Print		Staten Is	land Perform	ing Provider System, LLC -	Project 2.d.i		
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		
Enter Rev	iewer Comme	ent					
12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Fail	N/A		
Enter Rev	iewer Comme	ent					
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 Reviewer Comment							
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	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	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							





Print		Staten Is	iana Performi	ng Provider System, LLC -	Project 2.a.i	
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 Reviewer Comment						
Total						

	Domain 2 Pay for Reporting - 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		



Print		-	
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	

	Domain 2 Pay for Performance - 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	0.09
	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		2.09



Print

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)
Staten Island Performing Provider System, LLC - 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	
DY5, Q2 Payment Available	\$ 1,512,052
DY5, Q2 Payment Earned	\$ 491,417

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%		
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	151,205	151,205
Domain 5	Domain 3 Pay for Performance	Complete	10.00	2.50	25%	90%	90%	1,360,847	340,212
	Domain 3 Subtotal			12.50	63%	100%	100%	1,512,052	491,417
	Total	Complete	25.00	17.50	70%	100%	100%	1,512,052	491,417

Total Project 3.a.i AVs Awarded: 17.5 out of 25

Hide Reviewer Comments

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

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

Save & Return

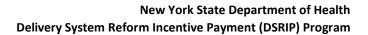
E .	Print		Statemis	iana i cijoiin	ing Provider System, LLC -	rroject s.u.i		
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Enter Reviewer Comment							
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Enter Reviewer Comment							
	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			
	•	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		E	nter Reviewei	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			



	Print			Staten is	iana Perjormi	ing Provider System, LLC -	Project 3.a.i		
	Enter Reviewer Comment								
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		E	nter Reviewei	Comment					
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
		Enter 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		
		Enter Reviewer Comment							
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		E	nter Reviewei	Comment					
	-	Total					0		

Domain 3 Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded			





Print Staten Island Perform	ing Provider System, LLC -	Project 3.a.i
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



Print Staten Island Performing Provider System, LLC - Proje						
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				
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1				
Screening for Clinical Depression and follow-up	Pass & Ongoing	1				
Total		10.00				

Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1			



	Print	iiig i rovider System, LLC -	
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
		- 11	
	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	Pass & Ongoing	0.5
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Fail	0
	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
	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Fail	0
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
_	Total		2.50



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

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

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,447,243
DY5, Q2 Payment Earned	\$ 470,354

	3.a.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%		
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	144,724	144,724
Domain 5	Domain 3 Pay for Performance (P4P	Complete	10.00	2.50	25%	90%	90%	1,302,518	325,630
	Domain 2 Subtotal			12.50	63%	100%	100%	1,447,243	470,354
Total Complete		25.00	17.50	70%	100%	100%	1,447,243	470,354	

Total Project 3.a.iv AVs Awarded: 17.5 out of 25

Hide Reviewer Comments

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



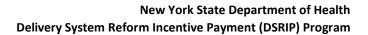
[Print							
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Enter Reviewer Comment							
•	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Enter Reviewer Comment							
	Total							

	Domain 1 Project Prescribed Milestones - Project 3.a.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



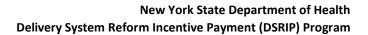
	Print		Staten Isla	and Performii	ng Provider System, LLC - F	Project 3.a.iv		
•	4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Rev.	iewer Comme	ent					
	5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	6. Develop care management services within the SUD treatment program.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	8. Use EHRs or other technical platforms to track all patients engaged in this project.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	Total					0.00		

Domain 3 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1		





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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 Antip	sychotic 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





Print Staten Island Performing	ng Provider System, LLC - F	roject 3.a.iv
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
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00

	Domain 3 Pay for Performance							
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	Fail	0					



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

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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
Fallers on after handialization for Mantal Illinois, within 20 days	D 0 Oi	0.5
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Fail	0
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Fail	0
Tollow up care for enhancin resembled Abrib Wedications initiation rinase	1011	U
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
 Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Fail	0
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Tabal		2.50
Total		2.50



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)
Staten Island Performing Provider System, LLC - Project 3.c.i

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,194,735
DY5, Q2 Payment Earned	\$ 1,075,261

	3.c.i Scoresheet																	
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)									
	Domain 1 Organizational	Complete	5.00	5.00	100%	0% 0%												
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-									
	Patient Engagement Speed	N/A	N/A	N/A	0%													
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-									
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	10%	119,473	119,473									
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	6.00	5.33	89%	90%	90%	1,075,261	955,788									
Domain 3 Subtotal			12.00	11.33	94%	100%	100%	1,194,735	1,075,261									
	Total Complete			16.33	96%	100%	100%	1,194,735	1,075,261									

Total Project 3.c.i AVs Awarded: 16.33 out of 17

Hide Reviewer Comments

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



Print		Staten	isiunu Perjorni	ling Provider System, LLC -	Project 3.c.i		
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
Enter Rev	iewer Comme	nt					
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
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.	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment						
	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 Comment							
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Pass & Complete	N/A		



Print		-	, ,	-		
Enter Reviewer Comment						
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comme	ent					
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 Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment						
Total						

	Domain 3 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1
	Comprehensive Diabetes screening – All Three Tests	Pass & Ongoing	1
	(HbA1c, dilated eye exam, nephropathy monitor)	1 ass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1



Print

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)
Staten Island Performing Provider System, LLC - Project 3.c.i

Print		
Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.33333333
Health Literacy - Describing How to Follow Instructions	Pass & Ongoing	0.33333333
Health Literacy - Explained What To Do If Illness Got Worse	Pass & Ongoing	0.33333333
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.33333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.33333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.33333333
Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
Total		6.00

Domain 3 Pay for Performance

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

Save & Return

	Print Staten Island Perform	ning Provider System, LLC	- Project 3.c.i
AV Driving	Measure	Reviewer Status	AVs Awarded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1
	Comprehensive Diabetes screening – All Three Tests	Pass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
	Health Literacy - Instructions Easy to Understand	Fail	0
		- "	_
	Health Literacy - Describing How to Follow Instructions	Fail	0
	Haalth Litagram, Fundained What To De If Illinois Cat Wayne	Dans Q Onnaina	0.2222222
	Health Literacy - Explained What To Do If Illness Got Worse	Pass & Ongoing	0.33333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0 2222222
	Medical Assistance with smoking and robacco ose cessation - Advised to Quit	Pass & Oligoling	0.33333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.33333333
	Medical Assistance with smoking and robacco osc cessation. Discussed cessation Medication	1 d33 & Oligonia	0.55555555
_	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.33333333
	The state of the s	. 400 & 011801118	0.0000000
	Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
		0	
	Total		5.33



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - Project 3.g.ii

Project Snapshot						
Project Domain Clinical Improvement Projects (Domain 3)						
Project ID	3.g.ii					
Project Title	Integration of Palliative Care into Nursing Homes					

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,037,596
DY5, Q2 Payment Earned	\$ 1,037,596

			3.g.ii Score	sheet																
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)											
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0% 0%													
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			0%	-	-										
	Patient Engagement Speed	N/A	N/A	N/A	0%															
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-											
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	10%	103,760	103,760											
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	4.00	4.00	100%	90%	90%	933,836	933,836											
	Domain 2 Subtotal			9.00	100%	100%	100%	1,037,596	1,037,596											
Total Complete		14.00	14.00	100%	100%	100%	1,037,596	1,037,596												

Total Project 3.g.ii AVs Awarded: 14 out of 14

Hide Reviewer Comments

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



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Enter Reviewer Comment								
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A			
Enter Rev	iewer Comme	ent						
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A			
Enter Reviewer Comment								
Total								

	Domain 1 Project Prescribed Milestones - Project 3.g.ii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
		Enter Reviewer Comment							
	including Hospice, to bring the palliative care supports and services into the	12/31/2015	12/31/2015	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	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			
	Enter Reviewer Comment								
•	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			
	Enter Reviewer Comment								



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5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
6. Use EHRs or other IT platforms to track all patients engaged in this project.	6/30/2016	6/30/2016	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
Total						

	Domain 3 Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of patients who were offered or provided an intervention for pain symptoms experienced during the past week	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention for physical symptoms (other than pain) experienced during the past week	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention for not feeling at peace during the past week	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention 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				



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)
Staten Island Performing Provider System, LLC - Project 3.g.ii

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Total 5.00

	Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of patients who were offered or provided an intervention for pain symptoms experienced during the	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention for physical symptoms (other than pain)	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention for not feeling at peace during the past	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention for depressive feelings experienced during	Pass & Ongoing	1				
	Percentage of patients who were offered or provided an intervention when there was no advance directive in	N/A	N/A				
	Total 4.00						



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - Project 4.a.iii

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

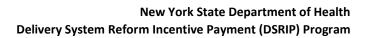
Payment Snapshot	
DY5, Q2 Payment Available	\$ 847,094
DY5, Q2 Payment Earned	\$ 847,094

	4.a.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%	0%	0% 0%	-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	100%	100%	847,094	847,094
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	100%	100%	847,094	847,094
	Total Complete			16.00	100%	100%	100%	847,094	847,094

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



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

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



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - Project 4.b.ii

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

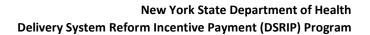
Payment Snapshot	
DY5, Q2 Payment Available	\$ 720,030
DY5, Q2 Payment Earned	\$ 720,030

	4.b.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q2)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	0%	0%			
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%			-	-	
	Patient Engagement Speed	N/A	N/A	N/A	0%					
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	100%	100%	720,030	720,030	
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			17.00	100%	100%	100%	720,030	720,030	
	Total Complete			22.00	100%	100%	100%	720,030	720,030	

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

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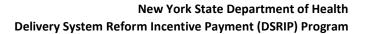
	Domain 4 Pay for Performance and Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1				
	Enter Reviewer Comment		-				





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	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





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Enter Reviewer Comment		
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		
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		



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)

Staten Island Performing Provider System, LLC - Project 4.b.ii

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•	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
	Enter Reviewer Comment		
Total			