

Achievement Value (AV) Scorecard Westchester Medical Center

General Instructions									
Step	Description/Link	Image							
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	U 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 (Girk on the purgle file below to access each below to access the term of the althout the below to access the term of the althout to access the term of
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 Print All Achievement Value (AV) Scorecard Westchester Medical Center

	PPS Information					
Quarter	DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)					
PPS	Westchester Medical Center					
PPS Number	21					

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Data		Payme	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.i	20.00	16.00	0.00	16.00	\$ 2,514,793	\$ 1,579,290				
2.a.iii	20.00	16.00	0.00	16.00	\$ 2,065,723	\$ 1,297,274				
2.a.iv	20.00	16.00	0.00	16.00	\$ 2,424,979	\$ 1,522,887				
2.b.iv	20.00	16.00	0.00	16.00	\$ 1,931,002	\$ 1,212,669				
2.d.i	13.00	10.25	0.00	10.25	\$ 2,235,562	\$ 806,199				
3.a.i	24.00	20.50	0.00	20.50	\$ 1,731,363	\$ 1,125,386				
3.a.ii	24.00	20.50	0.00	20.50	\$ 1,661,560	\$ 1,080,014				
3.c.i	17.00	16.33	0.00	16.33	\$ 1,347,211	\$ 1,212,489				
3.d.iii	13.00	11.00	0.00	11.00	\$ 1,392,118	\$ 765,665				

NEW YORK STATE Of Health Medicaid Redesign Team	m New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program										
Print Summary Print All					Acl			(AV) Scorecard Medical Center			
4.b.i	22.00	22.00	0.00	22.00	\$	1,032,861	\$	1,032,861			
4.b.ii	22.00	22.00	0.00	22.00	\$	763,419	\$	763,419			
AV Adjustments (Column F)											
Total	215.00	186.58	0.00	186.58	\$	19,100,589	\$	12,398,153			



Print

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

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



S	ave & R	eturn	Achieveme	ent Value (AV) S		22 July 1, 2019 - September 30,
	Prin				Westchester I	Medical Center - Domain 1 Org
		1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing
		 Create a workforce transition roadmap for achieving defined target workforce 	12/31/2016	N/A	Completed	Pass & Complete
Additional Workforce Strategy	•	 Perform detailed gap analysis between current state assessment of workforce and projected future state 	3/31/2017	N/A	Completed	Pass & Complete
Budget						
Updates (non AV- driving)		 Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements 	6/30/2016	N/A	Completed	Pass & Complete
		5. Develop training strategy	3/31/2017	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



Sa	ive & Re	eturn	Achieveme	ent Value (AV) S		2 July 1, 2019 - September 30, .	
2	Print				Westchester N	Medical Center - Domain 1 Orgo	anizational A
Additional Workforce Strategy Topic Areas		Major Dependencies on Organizational Workstreams Roles and Responsibilities Key Stakeholders IT Expectations Progress Reporting	N/A N/A N/A N/A	N/A N/A N/A N/A	In Process In Process In Process In Process In Process	Pass & Ongoing	N/A
			Total				1

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



Print	Sa	ave & Re	turn	
		Print		

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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

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



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

3	Print				Westchester Medical Center - Domain 1 Orga			
Updates								
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete		
Governance Process Update		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete		
		5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	6/30/2016	N/A	Completed	Pass & Complete		
		6. Finalize partnership agreements or contracts with CBOs	3/31/2016	N/A	Completed	Pass & Complete		
Additional Governance Milestones (non AV- driving)		7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	12/31/2016	N/A	Completed	Pass & Complete		
		8. Finalize workforce communication and engagement plan	3/31/2017	N/A	Completed	Pass & Complete		

Save & Return



Save & Return

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

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

Westchester Medical Center - Domain 1 Organizational AVs Print 9. Inclusion of CBOs in PPS Pass & Complete 3/31/2016 N/A Completed Implementation Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A Pass & Ongoing In Process Workstreams Roles and Responsibilities N/A N/A Pass & Ongoing In Process Additional Governance N/A Key Stakeholders N/A Topic Areas N/A Pass & Ongoing In Process IT Expectations N/A N/A Pass & Ongoing In Process Pass & Ongoing N/A N/A Progress Reporting In Process Total 1

Section 03 - Financial Sustainability



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Print

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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



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

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

Save & Return

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs



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

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

	Prin	t				Aedical Center - Domain 1 Orga	
	•	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 Cultural	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
ompetency Health teracy opic 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	tion 05 - IT Syster	ns and Processe	S		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded



S	ave & R	eturn	Achieveme	ent Value (AV) S		2 July 1, 2019 - September 30, 2	
-	Prin	t			Westchester I	Medical Center - Domain 1 Orgo	inizational AVs
	•	1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s).	12/31/2016	N/A	Complete	Pass & Complete	
		2. Develop an IT Change Management Strategy.	12/31/2016	N/A	Complete	Pass & Complete	
							N/A
IT Systems and Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2016	N/A	Complete	Pass & Complete	
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete	
		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	



Pass & Ongoing

Pass & Ongoing

Pass & Ongoing

N/A

0

Sa	ave & Re	eturn	Achieveme	ent Value (AV) S	corecard DY5, Q	
5	Print				Westchester N	1
Additional	-					
Additional - IT Systems and Processes Topic Areas -		Roles and Responsibilities	N/A	N/A	In Process	
		Key Stakeholders	N/A	N/A	In Process	
		Progress Reporting	N/A	N/A	In Process	

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs

		Sec	tion 06 - Perform	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. 	9/30/2016	N/A	Completed	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	Completed	Pass & Complete	N/A	

Total



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

	Print				Westchester N	Aedical Center - Domain 1 Orga	inizational AVs
		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 Performanc							
e Reporting 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				0

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Westchester Medical Center - Domain 1 Organizational AVs

		Sec	tion 07 - Practitio	ner Engagement	t		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Develop Practitioners communication and engagement plan. 	3/31/2016	N/A	Completed	Pass & Complete	



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

Westchester Medical Center - Domain 1 Organizational AVs Print 2. Develop training / education plan Practitioner N/A targeting practioners and other Engagement Pass & Complete professional groups, designed to educate 6/30/2016 N/A Completed them about the DSRIP program and your PPS-specific quality improvement agenda. Major Risks to Implementation & Risk N/A N/A Pass & Ongoing In Process Mitigation Strategies Major Dependencies on Organizational N/A Pass & Ongoing N/A In Process Workstreams Roles and Responsibilities N/A N/A In Process Pass & Ongoing Additional Practitioner N/A Engagement Key Stakeholders N/A N/A Pass & Ongoing In Process Topic Areas N/A Pass & Ongoing **IT Expectations** N/A In Process Pass & Ongoing Progress Reporting N/A N/A In Process

Save & Return

STATE Of Health	edicaid Dedesign Team New York State Departm Delivery System Reform Incentive Payment (DS	
Save & Return	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 20 Westchester Medical Center - Domain 1 Organ	
Print		
	Total	0

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



Save & Return

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

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

Prin	t			Westchester I	Medical Center - Domain 1 Orgo
	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
		1. Perform a clinical integration 'needs assessment'.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Clinical							
Integration		2. Develop a Clinical Integration strategy.	12/31/2016	N/A	Completed	Pass & Complete	N/A
							N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	



S	ave & Re	eturn	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 201					
	Print				Westchester I	Medical Center - Domain 1 Orga	nizational AVs	
Additional Clinical Integration Topic Areas			-				N/A	
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	11/2	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
			Total				0	





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

AV Adjustment Scoresheet									
	AVs Per	Total Total AVs	Total AVs	Total AVs Awarded		Net AVs Awarded			
Adjustment	Projects		Available	Net	Percentage	Adjusted AVs	Net	Percentage AV	
	Froject	Selected	lected	Awarded	AV		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	160.00	131.58	82%	0.00	131.58	82%	
Total			215.00	186.58	87%	0.00	186.58	87%	

Hide Reviewer Comments

Organizational

Project Adjustments

No AV Adjustments

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



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

Westchester Medical Center - Project 2.a.i

 Project Snapshot

 Project Domain
 System Transformation Projects (Domain 2)

 Project ID
 2.a.i

 Project Title
 Create an Integrated Delivery System focused on Evidence Based Medicine and Population Health Management

Payment Snapsh	ot	
DY5, Q2 Payment Available	\$	2,514,793
DY5, Q2 Payment Earned	\$	1,579,290

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

			2.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%		-	
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%	176,036	176,036
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	6.00	60%	93%	93%	2,338,757	1,403,254
	Domain 2 Subtotal			11.00	73%	100%	100%	2,514,793	1,579,290
	Total Complete		20.00	16.00	80%	100%	100%	2,514,793	1,579,290

Total Project 2.a.i AVs Awarded: 16 out of 20

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





Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.i

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

	Domain 1 Project Prescribed N	lilestones - P	roject 2.a.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.i

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 Revie	wer Commer	nt					
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A		
Enter Reviewer Comment							
8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A		
Enter Reviewer Comment							
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Fail	N/A		
Enter Reviewer Comment							



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.i

	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
Total						0.00	

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 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				





Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.i

	Domain 2 Pay for Performance		AVS
AV Driving	Measure	Reviewer Status	Avs
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	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	Fail	0
	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	Pass & Ongoing	1
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Fail	0
	Enter Reviewer Comment		-

2	New YORK Department of Health Medicaid Redesign Team		New York State Departm n Incentive Payment (DS	
	Save & Return Print	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Sep West	otember 30, 2019 (Paymo chester Medical Center -	
	Primary Care - Length of Relationship - Q3		Pass & Ongoing	0.5
		Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Enter Reviewer Comment	Pass & Ongoing	0.5
•	Primary Care - Usual Source of Care - Q2	Enter Reviewer Comment Enter Reviewer Comment	Pass & Ongoing	0.5



Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.iii

	Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)	DY5, Q2 Payment Availa
Project ID	2.a.iii	DY5, Q2 Payment Earne
	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	\$ 2,065,723
DY5, Q2 Payment Earned	\$ 1,297,274

	2.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%	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%	144,601	144,601			
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	6.00	60%	93%	93%	1,921,122	1,152,673			
	Domain 2 Subtotal		15.00	11.00	73%	100%	100%	2,065,723	1,297,274			
	Total	Complete	20.00	16.00	80%	100%	100%	2,065,723	1,297,274			

Total Project 2.a.iii AVs Awarded: 16 out of 20

Hide Reviewer Comments

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

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.iii

	Enter Reviewer Comment									
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A				
	Enter Revie	wer Commen	t							
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A				
	Enter Reviewer Comment									
Total 0.00										

	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	Fail	N/A					
	Enter Reviewer Comment										
	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A					

NEW YORK STATE of Health Medicaid Redesign Team

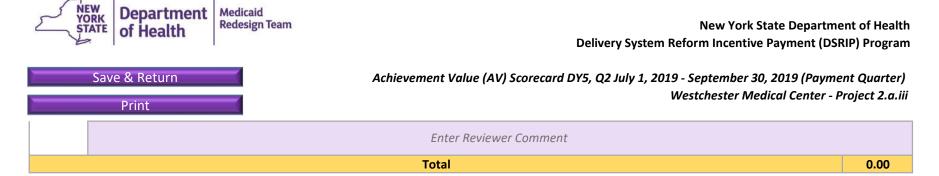
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Enter Reviewer Comment											
4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	N/A						
Enter Reviewer Comment											
5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A						
Enter Reviewer Comment											
6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A						
Enter Reviewer Comment											
7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A						
Enter Reviewer Comment											
 8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments). 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A						
Enter Revie	ewer Commen	ot									
 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						



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			





Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.iv

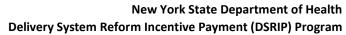
	Project Snapshot	Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	DY5, Q2 Payment Available	\$ 2,424,979
Project ID	2.a.iv	DY5, Q2 Payment Earned	\$ 1,522,887
Project Title	Create a medical village using existing hospital infrastructure		

	2.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%	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%	169,749	169,749		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	6.00	60%	93%	93%	2,255,230	1,353,138		
	Domain 2 Subtotal		15.00	11.00	73%	100%	100%	2,424,979	1,522,887		
	Total	Complete	20.00	16.00	80%	100%	100%	2,424,979	1,522,887		

Total Project 2.a.iv AVs Awarded: 16 out of 20

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



Medicaid Redesign Team

> Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.iv

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

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	Save & Return Achievement Value	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)							
	Print			West	chester Medical Center - P	Project 2.a.iv			
•	4. Ensure that all safety net providers participating in Medical Villages a 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 patie record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	5. Use EHRs and other technical platforms to track all patients engaged the project.	in 3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	 Ensure that EHR systems used in Medical Villages meet Meaningful U Stage 2 	se 3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	Total					0.00			

	Domain 2 Pay for Reporting - Project 2.a.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					



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.a.iv

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.iv



Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

	Project Snapshot	Payment Snapshot				
Project Domain	System Transformation Projects (Domain 2)	DY5, Q2 Payment Available	\$	1,931,002		
Project ID	2.b.iv	DY5, Q2 Payment Earned	\$	1,212,669		
Project Title	Care transitions intervention patients with a care transition plan developed prior to discharge.					

			2.b.iv Scores	heet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (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%	135,170	135,170	
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	6.00	60%	93%	93%	1,795,832	1,077,499	
	Domain 2 Subtotal		15.00	11.00	73%	100%	100%	1,931,002	1,212,669	
Total Complete		Complete	20.00	16.00	80%	100%	100%	1,931,002	1,212,669	

Total Project 2.b.iv AVs Awarded: 16 out of 20

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

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

-	Enter Reviewer Comment							
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A		
	Enter Revie	wer Commen	t					
	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.iv						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	 Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. 	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	it				
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	nt .				

NEW YORK STATE Of Health Medicaid Redesign Team

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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/#	
Enter Revie	Enter Reviewer Comment					
5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/#	
Enter Reviewer Comment						
7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
Total					0.0	

	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					

NYS	New York State Department of HealthMedicaid Redesign TeamNew York State Department of HealthNew York State Department of HealthDelivery System Reform Incentive Payment (DSRIP) Progr						
	Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.b.iv						
	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



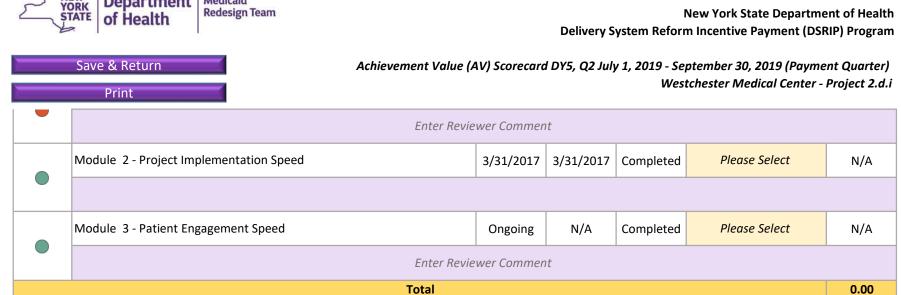
Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 2.d.i

	Project Snapshot	Payment Snap	shot
Project Domain	System Transformation Projects (Domain 2)	DY5, Q2 Payment Available	\$ 2,235,562
Project ID	2.d.i	DY5, Q2 Payment Earned	\$ 806,199
	Implementation of Patient Activation Activities to		
Project Title	Engage, Educate and Integrate the uninsured and		
	low/non-utilizing Medicaid populations into		

		2.d.i Scores	heet										
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 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	7%	7%	156,489	156,489				
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	4.00	1.25	31%	93%	93%	2,079,072	649,710				
	Domain 2 Subtotal		8.00	5.25	66%	100%	100%	2,235,562	806,199				
	Total	Complete	13.00	10.25	79%	100%	100%	2,235,562	806,199				

Total Project 2.d.i AVs Awarded: 10.25 out of 13

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



	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 Revie	wer Commen	t				
	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 Revie	wer Commen	t				
•	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 Revie	wer Commen	t				

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	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	nt			
	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 Revie	wer Commer	nt			
	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	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 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 Revie	wer Commer	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	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	nt .			
	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A



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Enter Reviewer Comment						
11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Revie	wer Commer	it				
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 Commen	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 Commen	ment				
14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services and	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Revie	wer Commen	ot				
15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						



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17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	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			



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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
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Fail	0
	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	Fail	0
	Enter Reviewer Comment		
	ED use by uninsured	Pass & Ongoing	1
	Enter Reviewer Comment		
	PAM Level	Fail	0
	Enter Reviewer Comment		
	Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for	Fail	0
	Enter Reviewer Comment		
	Total		1.25



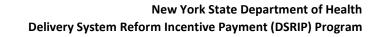
Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.a.i

	Project Snapshot	Payment Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)	DY5, Q2 Payment Available	\$	1,731,363		
Project ID	3.a.i	DY5, Q2 Payment Earned	\$	1,125,386		
Project Title	Integration of primary care and behavioral health services					

	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%					
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 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	173,136	173,136	
Domain 5	Domain 3 Pay for Performance		9.00	5.50	61%	90%	90%	1,558,226	952,250	
	Domain 3 Subtotal				82%	100%	100%	1,731,363	1,125,386	
	Total Complete			20.50	85%	100%	100%	1,731,363	1,125,386	

Total Project 3.a.i AVs Awarded: 20.5 out of 24

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	



Print Enter Reviewer Comment Module 2 - Project Implementation Speed N/A Completed N/A Ongoing Please Select Enter Reviewer Comment Module 3 - Patient Engagement Speed N/A Completed Ongoing Please Select N/A Enter Reviewer Comment Total 0

	Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3								
	✓ 3.a.i Model 1								
Model	AV Project Requirement and Metric/Deliverable Required Committed Milestone Driving Dread Due Date Due Date 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							
		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		Ent	Enter Reviewer Comment						

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k Return rint	Achievement Value (A	AV) Scorecard	l DY5, Q2 July	-	ptember 30, 2019 (Payme tchester Medical Center		
	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A	
	Enter Reviewer Comment						
	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	En	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



1	Save & Return	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se			
	Print	Wes	tchester Medical Center -	Project 3.a.i	
	Diabetes Monitoring for Peop	Pass & Ongoing	1		
	Diabetes Screening for People	e with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1	
	Follow-up after hospitalizatio	n for Mental Illness - within 30 days	Pass & Ongoing	0.5	
	Follow-up after hospitalizatio	n for Mental Illness - within 7 days	Pass & Ongoing	0.5	
	Follow-up care for Children P	rescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5	
	Follow-up care for Children P	rescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5	
	Engagement of Alcohol and C	ther Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5	
	Initiation of Alcohol and Othe	r Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5	



Save & Return	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se Wes	ptember 30, 2019 (Payme tchester Medical Center -	
Print	VVE3	ichester weuldt center -	Froject S.u.i
Potentially Preventable Emer	rgency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depress	sion and follow-up	Pass & Ongoing	1
	Total		10.00

Domain 3 Pay for Performance		
Measure	Reviewer Status	AVS
Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
		1
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
-oliow-up after nospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
- Il an an after han te line time for Marshall Ille and a side in 7 days	Dess & Ossesing	
-oliow-up after nospitalization for Mental Illness - Within 7 days	Pass & Ongoing	0.5
	Measure Adherence to Antipsychotic Medications for People with Schizophrenia Antidepressant Medication Management - Effective Acute Phase Treatment	MeasureReviewer StatusAdherence to Antipsychotic Medications for People with SchizophreniaFailAntidepressant Medication Management - Effective Acute Phase TreatmentPass & OngoingAntidepressant Medication Management - Effective Continuation Phase TreatmentFailCardiovascular Monitoring for People with Cardiovascular Disease and SchizophreniaN/ADiabetes Monitoring for People with Diabetes and SchizophreniaFailDiabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic MedicationPass & OngoingFollow-up after hospitalization for Mental Illness - within 30 daysPass & Ongoing



-	Save & Return	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se		
	Print	Wes	tchester Medical Center -	Project 3.a.i
	Follow-up care for Children F	Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
	Follow-up care for Children F	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 Oth	er Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
	Potentially Preventable Eme	rgency Department Visits (for persons with BH diagnosis) ±	Fail	0
	Screening for Clinical Depres	sion and follow-up	Pass & Ongoing	1
		Total		5.50



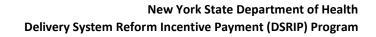
Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

Project Snapshot		Payment Snapsho	ot	
Project Domain	Clinical Improvement Projects (Domain 3)	DY5, Q2 Payment Available	\$	1,661,560
Project ID	3.a.ii	DY5, Q2 Payment Earned	\$	1,080,014
Project Title	Behavioral health community crisis stabilization services			

			3.a.ii Scores	heet					
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	10.00	10.00	100%	10%	10%	166,156	166,156
Domain 5	Domain 3 Pay for Performance (P4P)	complete	9.00	5.50	61%	90%	90%	1,495,404	913,858
	Domain 2 Subtotal			15.50	82%	100%	100%	1,661,560	1,080,014
Total Com		Complete	24.00	20.50	85%	100%	100%	1,661,560	1,080,014

Total Project 3.a.ii AVs Awarded: 20.5 out of 24

Domain 1 Project Milestones - Project 3.a.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



Print Enter Reviewer Comment Module 2 - Project Implementation Speed N/A Completed N/A Ongoing Please Select Enter Reviewer Comment Module 3 - Patient Engagement Speed N/A Completed Ongoing Please Select N/A 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	ewer 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 Reviewer Comment							
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	nt						
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		

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



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	Enter Reviewer Comment					
•	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total					0.00	

	Domain 3 Pay for Reporting				
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5		
	P4R Measure DY3Q4				
	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5		
	P4R Measure DY3Q4				
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1		
	P4R Measure DY3Q4				
	Total		2.00		

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



Print Pass & Ongoing Adherence to Antipsychotic Medications for People with Schizophrenia 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

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	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					

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



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

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

Westchester Medical Center - Project 3.a.ii Print 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 Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ± Fail 0 Screening for Clinical Depression and follow-up Pass & Ongoing 1 Total 5.50



Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.c.i

	Project Snapshot	Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)	DY5, Q2 Payment Available	\$ 1,347,211
Project ID	3.c.i	DY5, Q2 Payment Earned	\$ 1,212,489
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)		

		3.c.i Scores	heet						
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%	134,721	134,721
Domain 5	Domain 3 Pay for Performance (P4P)	complete	6.00	5.33	89%	90%	90%	1,212,489	1,077,768
Domain 2 Subtotal		12.00	11.33	94%	100%	100%	1,347,211	1,212,489	
	Total	Complete	17.00	16.33	96%	100%	100%	1,347,211	1,212,489

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

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

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.c.i

-	Enter Reviewer Comment							
	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 0.00								

	Domain 1 Project Prescribed Milestones - Project 3.c.i						
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer 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		

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Enter Reviewer Comment						
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment						
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	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.	3/31/2017	Completed	Fail	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 (HbA1c, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1				
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1				



-	Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se	ntember 30 2019 (Payme	ont Quarter)
-		tchester Medical Center -	-
•	Health Literacy - Instructions Easy to Understand	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
	Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
	Total		6.00



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Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.d.iii

	Project Snapshot	Payment Snapsh	ot	
Project Domain	Clinical Improvement Projects (Domain 3)	DY5, Q2 Payment Available	\$	1,392,118
Project ID	3.d.iii	DY5, Q2 Payment Earned	\$	765,665
Project Title	Implementation of evidence-based medicine guidelines for asthma management			

		3.d.iii Scores	heet								
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 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	139,212	139,212		
Domain 5	Domain 3 Pay for Performance (P4P)	complete	4.00	2.00	50%	90%	90%	1,252,906	626,453		
	Domain 2 Subtotal		8.00	6.00	75%	100%	100%	1,392,118	765,665		
Total Complete		13.00	11.00	85%	100%	100%	1,392,118	765,665			

Total Project 3.d.iii AVs Awarded: 11 out of 13

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

Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 3.d.iii

-	Enter Reviewer Comment								
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	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.d.iii									
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded				
	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
	Enter Reviewer Comment									
	 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
	Enter Reviewer Comment									
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
	Enter Reviewer Comment									

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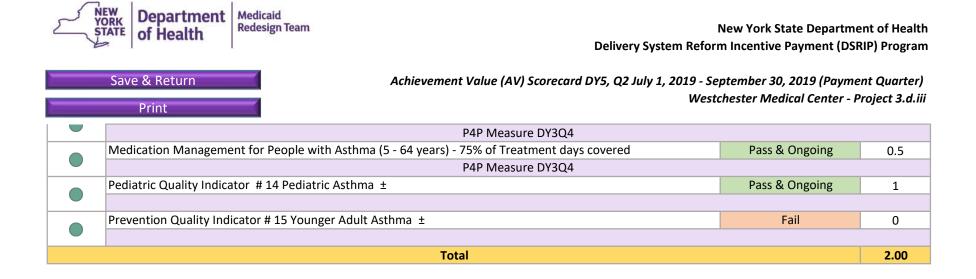
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Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter)								
Print			West	chester Medical Center - P	Project 3.d.iii			
4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
Total					0.00			

Domain 3 Pay for Reporting							
AV Driving	Measure	Reviewer Status	AVs Awarded				
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1				
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5				
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5				
	Pediatric Quality Indicator #14 Pediatric Asthma ±	Pass & Ongoing	1				
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1				
	Total		4.00				

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





Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 4.b.i

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

Payment Snapshot	
DY5, Q2 Payment Available	\$ 1,032,861
DY5, Q2 Payment Earned	\$ 1,032,861

		4.b.i Scores	heet							
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%			-	-	
	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%	1,032,861	1,032,861	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal		17.00	17.00	100%	100%	100%	1,032,861	1,032,861	
Total Complete		22.00	22.00	100%	100%	100%	1,032,861	1,032,861		

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

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



Save & Return							
Print	West	tchester Medical Center -	Project 4.b.i				
	Enter Reviewer Comment						
Percentage of prematur	re death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1				
	Enter Reviewer Comment						
Percentage of prematur	re death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1				
	Enter Reviewer Comment						
Age-adjusted preventab	ole hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1				
	Enter Reviewer Comment						
Age-adjusted preventab White non-Hispanics	ole hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to	Pass & Ongoing	1				
	Enter Reviewer Comment						
Age-adjusted preventab Hispanics	ole hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-	Pass & Ongoing	1				
	Enter Reviewer Comment						
Percentage of adults wi	th health insurance - Aged 18- 64 years	Pass & Ongoing	1				
	Enter Reviewer Comment						
Age-adjusted percentag	e of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1				
,	Enter Reviewer Comment						



Save & Return	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se	ptember 30, 2019 (Payme	nt Quarteı
Print		tchester Medical Center -	
Percentage of adults who are obes	e	Pass & Ongoing	1
	Enter Reviewer Comment		
Percentage of children and adolesc	ents who are obese	Pass & Ongoing	1
	Enter Reviewer Comment		
Percentage of cigarette smoking ar	nong adults	Pass & Ongoing	1
	Enter Reviewer Comment		
Percentage of adults who receive a 75 years	colorectal cancer screening based on the most recent guidelines - Aged 50-	Pass & Ongoing	1
	Enter Reviewer Comment		
Asthma emergency department vis	it rate per 10,000	Pass & Ongoing	1
	Enter Reviewer Comment		
Asthma emergency department vis	it rate per 10,000 - Aged 0-4 years	Pass & Ongoing	1
	Enter Reviewer Comment		
Age-adjusted heart attack hospitali	zation rate per 10,000	Pass & Ongoing	1
	Enter Reviewer Comment		
Rate of hospitalizations for short-te	erm complications of diabetes per 10,000 - Aged 6- 17 years	Pass & Ongoing	1

NY S	NEW ORK TATE Department of Health Medicaid Redesign Team Delivery System		ork State Departme ntive Payment (DSR	
	Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2 Print		er 30, 2019 (Payme er Medical Center - I	
	Enter Reviewer Comment			
	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pa	ass & Ongoing	1
	Enter Reviewer Comment			
	Total			17.00



Save & Return Print Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - September 30, 2019 (Payment Quarter) Westchester Medical Center - Project 4.b.ii

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

Р	ayment Snapshot	
DY5, Q2 Payment Available	\$	763,419
DY5, Q2 Payment Earned	\$	763,419

	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%		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%	763,419	763,419	
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%	763,419	763,419	
	Total	22.00	22.00	100%	100%	100%	763,419	763,419		

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

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



Save & Return

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

. . ..

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

Print	chester Medical Center - F	Project 4.b.ii
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 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		



Save & Return Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - S		
Print	stchester Medical Center - I	Project 4.b
Percentage of adults who are obese	Pass & Ongoing	1
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

NE YC	BRK Department ATE of Health		New York State Departme m Incentive Payment (DSF	
	Save & Return Print	Achievement Value (AV) Scorecard DY5, Q2 July 1, 2019 - Se West	ptember 30, 2019 (Payme cchester Medical Center - I	
		Enter Reviewer Comment		
	Rate of hospitalizations	s for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
		Enter Reviewer Comment		
		Total		17.00