

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

Achievement Value (AV) Scorecard The New York and Presbyterian Hospital

General Instructions								
Step	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
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 link below to access each belowfully project report) Domain I: Organizational [All Projecto] AV Adjustments (Column 1) 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1 2.8.1
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



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

Print Summary

Print All

Achievement Value (AV) Scorecard
The New York and Presbyterian Hospital

PPS Information					
Quarter	DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)				
PPS	The New York and Presbyterian Hospital				
PPS Number	39				

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Payme	Payment Data						
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY5, Q4 Payment Available	DY5, Q4 Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizational funds are embedded within each project's payment					
2.a.i	20.00	13.75	0.00	13.75	\$ 295,784	\$ 123,860				
2.b.i	20.00	13.75	0.00	13.75	\$ 207,473	\$ 86,879				
2.b.iii	20.00	13.75	0.00	13.75	\$ 228,396	\$ 95,641				
2.b.iv	20.00	13.75	0.00	13.75	\$ 211,924	\$ 88,743				
3.a.i	24.00	17.00	0.00	17.00	\$ 185,031	\$ 55,509				
3.a.ii	24.00	17.00	0.00	17.00	\$ 183,647	\$ 55,094				
3.e.i	12.00	13.67	0.00	13.67	\$ 161,368	\$ 50,716				
3.g.i	10.00	10.00	0.00	10.00	\$ 114,117	\$ 114,117				
4.b.i	22.00	22.00	0.00	22.00	\$ 131,120	\$ 131,120				



AV Adjustments (Column F)

Total

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

1,828,358 \$

911,178

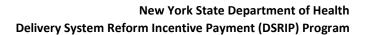
Print Summary							•	V) Scorecard
Print All				Th	e New	York and Pr	esbyte	rian Hospital
4.c.i	16.00	16.00	0.00	16.00	\$	109,499	\$	109,499

150.67

188.00

0.00

150.67 \$





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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment The New York and Presbyterian Hospital - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

	Workforce Strategy								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
Workforce Strategy Budget Updates									



Save & Return Print

		·				
		Define target workforce state (in line with DSRIP program's goals)	3/31/2016	N/A	Completed	Pass & Complete
		Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing
Additional Workforce Strategy	•	3. Perform detailed gap analysis between current state assessment of workforce	9/30/2016	N/A	Completed	Pass & Complete
		and projected future state				
Budget Updates					ı	
non AV-		4. Produce a compensation and benefit analysis, covering impacts on both				
driving)		retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	N/A	Completed	Pass & Complete
		partial placements				
					ı	
		5. Develop training strategy	12/31/2016	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



	PIIII						
		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							N/A
Strategy Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	,,,
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		<u>'</u>	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				



	Print			The New \	ork and Presbyt	terian Hospital - Domain 1 Orgo
		Module 1.2 - PPS Budget Report (Quarterly	y 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 sub- committee structure	6/30/2015	N/A	Completed	Pass & Complete	
		2. Establish a clinical governance					
Governance		structure, including clinical quality	12/31/2015	N/A	Completed	Pass & Complete	1
Structure		committees for each DSRIP project					



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Updates						
		Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete
Governance Process		Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete
Jpdate						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	N/A	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	9/30/2016	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	3/31/2016	N/A	Completed	Pass & Complete
univing)						
		8. Finalize workforce communication and engagement plan	12/31/2015	N/A	Completed	Pass & Complete



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	9. Inclusion of CBOs in PPS Implementation	3/31/2017	N/A	Completed	Pass & Complete	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	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 Fopic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	NA
		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 Compe	tency & Health I	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 /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	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Competency /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			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).	3/31/2016	N/A	Complete	Pass & Complete	
		Develop an IT Change Management Strategy.	N/A	N/A	In Process	Pass & Ongoing	
IT Systems		Develop roadmap to achieving clinical					
and Processes		data sharing and interoperable systems across PPS network	N/A	N/A	In Process	Pass & Ongoing	N/A
		Develop a specific plan for engaging	12/21/2215	21/2		D 00 11	
		attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	N/A	N/A	In Process	Pass & Ongoing	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



	Print			THE NEW 1	ork and Presbyt	erian Hospitai - Domain 1 Orga	iiiizutionui Av
Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							19/75
Topic Areas		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			
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.	3/31/2016	N/A	Completed	Pass & Coomplete	N/A
		6/30/2016	N/A	Completed	Pass (with Exception) & Complete	N/A
	Driving	AV Driving 1. Establish reporting structure for PPS-wide performance reporting and communication. 2. Develop training program for	AV Driving Milestone Date 1. Establish reporting structure for PPS-wide performance reporting and communication. 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality Required Due Date 3/31/2016	AV Driving Milestone Required Due Date Date 1. Establish reporting structure for PPS-wide performance reporting and communication. 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality Committed Due Date N/A	Driving Milestone Date Date Status 1. Establish reporting structure for PPS- wide performance reporting and communication. 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality Date Date Status A/31/2016 N/A Completed	AV Driving Milestone Date Date Status Reviewer Status 1. Establish reporting structure for PPS-wide performance reporting and communication. 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality Required Due Date Status N/A Completed Pass & Coomplete Pass (with Exception) & Completed Pass (with Exception) & Complete



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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	
		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 Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded				
		1. Develop Practitioners communication and engagement plan.	N/A	N/A	In Process	Pass & Ongoing					



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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.	N/A	N/A	In Process	Pass & Ongoing	N/A
-		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional ractitioner							NI / A
ngagement 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	



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment The New York and Presbyterian Hospital - Domain 1 Organizational AVs

Total 0

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



Print			The New Y	ork and Presbyt	terian Hospital - 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		Milestone Status	Reviewer Status	AV Awarded	
		1. Perform a clinical integration 'needs assessment'.	3/31/2017	N/A	Completed	Pass & Complete	N/A
Clinical							IN/A
Integration		2. Develop a Clinical Integration strategy.	3/31/2017	N/A	In Process	Pass & Complete	N/A
							14/71
		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	



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

Save & Return

	Print			The New Y	ork and Presbyt	terian Hospital - Domain 1 Orgo	inizational AVs	
Additional Clinical							N/A	
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	19/7	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing		
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
	Total							



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

Save & Return

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AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net AVs Awarded		
Adjustment	Project Projects		Available	Net	Percentage		Net	Percentage AV	
	Project	Selected	Available	Awarded	AV	AVS	Awarded	reiteillage AV	
Organizational Adjustments (applied to all projects)	5.00	10.00	50.00	50.00	100%	0.00	50.00	100%	
Project Adjustments (applied to one project only)	Various	10.00	138.00	100.67	73%	0.00	100.67	73%	
Total				150.67	80%	0.00	150.67	80%	

Hid	e Reviewer Comments	Organizational	Project Adjustments					
	No AV Adjustments							
	Please note that there are no AV adjustments for The New York and Presbyterian Hospital in DY2, Q1							



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.a.i

	Project Snapshot							
Project Domain	System Transformation Projects (Domain 2)							
Project ID 2.a.i								
	Create an Integrated Delivery System focused on							
Project Title	Evidence Based Medicine and Population Health							
	Management							

Payment Snapshot	
DY5, Q4 Payment Available	\$ 295,784
DY5, Q4 Payment Earned	\$ 123,860

	2.a.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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%	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%	20,705	20,705	
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	3.75	38%	93%	93%	275,080	103,155	
	Domain 2 Subtotal			8.75	58%	100%	100%	295,784	123,860	
	Total	Complete	20.00	13.75	69%	100%	100%	295,784	123,860	

Total Project 2.a.i AVs Awarded: 13.75 out of 20

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.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		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 Revie	wer Commer	nt				
Total						

	Domain 1 Project Prescribed Milestones - Project 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	Fail	N/A		
	Enter Revie	wer Commer	nt					
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		



Save & Return Print

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	Fail	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 Revie	wer Commer	nt						
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								



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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						

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				



Print

	Domain 2 Pay for Performance		
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	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	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	Pass & Ongoing	0.25
	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	Pass & Ongoing	1
	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		



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

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Primary Care - Length of Relationship - Q3		0
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Enter Reviewer Comment		-
Total		3.75



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

Project Snapshot						
Project Domain System Transformation Projects (Domain 2)						
Project ID	2.b.i					
Project Title	Ambulatory ICUs					

Payment Snapshot	
DY5, Q4 Payment Available	\$ 207,473
DY5, Q4 Payment Earned	\$ 86,879

		2.b.i Scores	heet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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%	14,523	14,523		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.75	38%	93%	93%	192,950	72,356		
Domain 2 Subtotal		15.00	8.75	58%	100%	100%	207,473	86,879			
	Total	Complete	20.00	13.75	69%	100%	100%	207,473	86,879		

Total Project 2.b.i AVs Awarded: 13.75 out of 20

Hide Reviewer Comments

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



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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 Milestones - Project 2.b.i							
AV Driving	Driving Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



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	4. Establish care managers co-located at each Ambulatory ICU site.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	5. Ensure that all safety net project participants 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 Revie	wer Commer	rt						
	6. Ensure that EHR systems used by participating providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	N/			
	Enter Reviewer Comment								
	7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-management.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Revie	ewer Commer	nt						
	8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the input of multiple providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/			
Enter Reviewer Comment									
	9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care and utilization.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/			
	Enter Revie	ewer Commer	nt						
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/			



Enter Reviewer Comment	
Total	0.00

	Domain 2 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AV5			
	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
	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 24 months	Fail	0
	Enter Reviewer Comment		



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	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	Pass & Ongoing	0.25
	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	Pass & Ongoing	1
	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	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		3.75



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iii

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 228,396
DY5, Q4 Payment Earned	\$ 95,641

	2.b.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	15,988	15,988
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.75	38%	93%	93%	212,408	79,653
Domain 2 Subtotal			15.00	8.75	58%	100%	100%	228,396	95,641
Total Complete		20.00	13.75	69%	100%	100%	228,396	95,641	

Total Project 2.b.iii AVs Awarded: 13.75 out of 20

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.b.iii							
AV Driving	ring 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		

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

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



	Print		The N	lew York and	l Presbyterian Hospital - P	roject 2.b.iii		
	3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2017	3/31/2017	Completed	Pass (with Exception) & Complete	N/A		
	Enter Reviewer Comment							
	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
Total						0.00		

Domain 2 Pay for Reporting				
AV Driving	Measure	Reviewer Status	AVS	
	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	



	Print Project 2.b.i		
	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
	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 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	Pass & Ongoing	0.25
	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



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

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	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 +/-	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Fail	0
	Enter Reviewer Comment		
	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		3.75



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 211,924
DY5, Q4 Payment Earned	\$ 88,743

	2.b.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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%	14,835	14,835
Domain 2	Domain 2 Pay for Performance (P4P) Complete		10.00	3.75	38%	93%	93%	197,089	73,909
Domain 2 Subtotal			15.00	8.75	58%	100%	100%	211,924	88,743
	Total	Complete	20.00	13.75	69%	100%	100%	211,924	88,743

Total Project 2.b.iv AVs Awarded: 13.75 out of 20

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

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	Print						
	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					0.00	

	Domain 1 Project Prescribed M	lilestones - Pr	oject 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						
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2017	3/31/2017	Completed	Fail	N/A	
	Enter Reviewer Comment						
	3. Ensure required social services participate in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



	Print		iner	vew York and	i Presbyterian Hospital - P	roject 2.b.iv	
	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commen	nt				
	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment							
	Total					0.00	

	Domain 2 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AV3			
	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			



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iv

Enter Reviewer Comment

Total 5.00

	Domain 2 Pay for Performance		
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	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	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	Pass & Ongoing	0.25
	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	Pass & Ongoing	1
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1



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Print	The New York and	d Presbyterian Hospital - F	Project 2.b.iv
	Enter Reviewer Comment		
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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 185,031
DY5, Q4 Payment Earned	\$ 55,509

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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%	18,503	18,503
Domain 5	Domain 3 Pay for Performance	Complete	9.00	2.00	22%	90%	90%	166,528	37,006
Domain 3 Subtotal			19.00	12.00	63%	100%	100%	185,031	55,509
	Total	Complete	24.00	17.00	71%	100%	100%	185,031	55,509

Total Project 3.a.i AVs Awarded: 17 out of 24

	Domain 1 Project Milestones - Project 3.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	In Process	Pass & Ongoing	N/A



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	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		

	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	
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed	Fail	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	
		Ent	ter Reviewer	Comment				
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A	



Print The New York and Presbyterian Hospital - Project 3						Project 3.a.i	
		En	ter Reviewer	Comment			
		8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
		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			
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1			

Pass & Ongoing

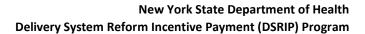
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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter) The New York and Presbyterian Hospital - Project 3.a.i

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 Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 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 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) ±





Print The New York and Presbyterian Hospital - Project 3.				
Screening for Clinical Depression and follow-up	Pass & Ongoing	1		
Total		10.00		

Domain 3 Pay for Performance					
AV Driving	Measure	Reviewer Status	AVS		
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0		
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0		
			I .		
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0		
	Conditions and Manifestine for Donale with Conditions and a Disease and Cohine about	N1 / A	21/2		
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A		
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0		
	Diabetes Worldoning for Feople with Diabetes and Schizophreina	T dii	U		
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0		
	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0		
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0		
			1		
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0		
	E III. C. CLUI D. C. LADUDAN II. C. C. C. C. D.	D 00 :			
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5		



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.i

Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
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
5. 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5.	. 255 57 371801118	

Total



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.ii

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 183,647
DY5, Q4 Payment Earned	\$ 55,094

	3.a.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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	10.00	10.00	100%	10%	10%	18,365	18,365	
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	9.00	2.00	22%	90%	90%	165,282	36,729	
	Domain 2 Subtotal			12.00	63%	100%	100%	183,647	55,094	
Total Complete		24.00	17.00	71%	100%	100%	183,647	55,094		

Total Project 3.a.ii AVs Awarded: 17 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



<i>[</i>	Print						
	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					0.00	

	Domain 1 Project Prescribed Milestones - Project 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.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	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.	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	



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Enter Revie	wer Commen	t				
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).	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	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.	3/31/2017	3/31/2017	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	
	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. Enter Revie 6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours). Enter Revie 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff. Enter Revie 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. Enter Revie 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers. Enter Revie 10. Ensure quality committee is established for oversight and	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. Enter Reviewer Comment 3/31/2017	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. 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. Enter Reviewer Comment	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. Enter Reviewer Comment 6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours). Enter Reviewer Comment 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff. 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. Enter Reviewer Comment 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers. Enter Reviewer Comment 10. Ensure quality committee is established for oversight and 23/31/2017 3/31/2017 Completed Pass & Complete Pass	

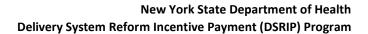


	Print		ine	new York an	a Presbyterian Hospitai - F	roject 3.a.ii
	Enter Reviewer Comment					
	11. Use EHRs or other technical platforms to track all patients engaged this project.	in 3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total				0.00		

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



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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
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 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
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





Achievement Value (AV) Scorecard DY5, 04 January 1, 2020 - March 31, 2020 (Payment Quarter)

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Print	The New York and	d Presbyterian Hospital - F	Project 3.a.ii
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	Fail	0
	Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Fail	0
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	Dishete Meritaria for Decale with Disheter and Cabinarhamia	F. 11	
	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
	Diabetes Screening for Feople with Schizophilenia of Dipolar Disease who are osing Antipsychotic Medication	I all	U
_	Follow-up after hospitalization for Mental Illness - within 30 days	Fail	0
	Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5



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Print The New York and	d Presbyterian Hospital - I	Project 3.a.ii
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
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		2.00



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

	Project Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)				
Project ID	3.e.i				
	Comprehensive project to decrease HIV/AIDS				
Project Title	transmission—development of Center of				
	Excellence management of HIV/AIDS				

Payment Snapshot	
DY5, Q4 Payment Available	\$ 161,368
DY5, Q4 Payment Earned	\$ 50,716

	3.e.i Scoresheet													
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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%		5 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	7.00	7.00	100%	10%	10%	16,137	16,137					
Domain 5	Domain 3 Pay for Performance	Complete	7.00	1.67	24%	90%	90%	145,231	34,579					
Domain 3 Subtotal				8.67	124%	100%	100%	161,368	50,716					
	Total	Complete	12.00	13.67	114%	100%	100%	161,368	50,716					

Total Project 3.e.i AVs Awarded: 13.666666666667 out of 12

Domain 1 Project Milestones - Project 3.e.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



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

	Domain 1 Project Prescribed Milestones - Project 3.e.i Models 1, 2 and 3							
	☐ 3.e.i Model 1 ✓ 3.e.i Model 2							
Model	AV Driving	Project Requirement and Metric/Deliverable	Project Requirement and Metric/Deliverable Required Due Date Due Date Status Reviewer Status					
		8. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment							
	•	9. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
		10. Co-locate care management services including Health Home care managers for those eligible for Health Homes.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	



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		Ent	ter Reviewer	Comment				
		11. Develop a referral process and connectivity for referrals of people who qualify for but are not yet in a Health Home.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
		12. Ensure understanding and compliance with evidence- based guidelines for management of HIV/AIDS (and HCV)	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
3.e.i Model 2	•	13. Ensure coordination of care between all available services preferably through a single electronic health/medical/care management record.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Enter Reviewer Comment						
		14. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms 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 ups, by the end of DY 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
		15. Ensure that EHR systems or other IT platforms, used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				



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		16. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment							
		17. Seek designation as center of excellence from New York State Department of Health.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment							
Total						0			

	Domain 3 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	HIV/AIDS Comprehensive Care : Engaged in Care	Pass & Ongoing	1			
	HIV/AIDS Comprehensive Care: Syphilis Screening	Pass & Ongoing	1			
	HIV/AIDS Comprehensive Care: Viral Load Monitoring	Pass & Ongoing	1			
	Cervical Cancer Screening	Pass & Ongoing	1			
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333			



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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		
Viral Load Suppression	Pass & Ongoing	1		
Chlamydia Screening (16 – 24 Years)	Pass & Ongoing	1		
		_		
<u>Total</u>		7		

	Domain 3 Pay for Performance		
AV Driving	Measure	Reviewer Status	Avardad
	HIV/AIDS Comprehensive Care: Engaged in Care	Fail	0
	HIV/AIDS Comprehensive Care: Syphilis Screening	Fail	0
	HIV/AIDS Comprehensive Care: Viral Load Monitoring	Fail	0
	Cervical Cancer Screening	Fail	0



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Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Fail	0
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Viral Load Suppression	Pass & Ongoing	1
Chlamydia Screening (16 – 24 Years)	Fail	0
Total		1.6666667



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.g.i

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 114,117
DY5, Q4 Payment Earned	\$ 114,117

	3.g.i Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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	5.00	5.00	100%	10%	100%	114,117	114,117			
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	0.00	0.00	0%	90%	0%	-	-			
Domain 2 Subtotal		5.00	5.00	100%	100%	100%	114,117	114,117				
	Total	Complete	10.00	10.00	100%	100%	100%	114,117	114,117			

Total Project 3.g.i AVs Awarded: 10 out of 10

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



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	Enter Reviewer Comment							
	Module 2 - Project Implementation Speed	3/17/2017	3/17/2017	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.g.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	Completed	Fail	N/A		
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		



Print		Ine	New York an	d Presbyterian Hospital -	Project 3.g.i
5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	Completed	Fail	N/A
6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Total					0.00

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





Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.g.i

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Total 5.00

	Domain 3 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AV5
	Percentage of patients indicating need who were offered or provided an intervention for pain symptoms experienced during the past week	N/A	N/A
	Percentage of patients indicating need who were offered or provided an intervention for physical symptoms	N/A	N/A
	(other than pain) experienced during the past week	<u> </u>	,
	Percentage of patients indicating need who were offered or provided an intervention for not feeling at peace during the past week	N/A	N/A
	Percentage of patients indicating need who were offered or provided an intervention for depressive feelings	N/A	N/A
	experienced during the past week	.,,,,	14/1
	Percentage of ptients who were offered or provided an intervention when there was no advance directive in place	N/A	N/A
	Total		0.00



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 131,120
DY5, Q4 Payment Earned	\$ 131,120

	4.b.i Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	100%	100%	131,120	131,120				
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%	131,120	131,120				
	Total Complete		22.00	22.00	100%	100%	100%	131,120	131,120				

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	Reviewer Status	AVs Awarded					
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1					



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	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		



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	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



Save & Return Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quart					
	Print Print The New York and Presbyterian Hospital - Proje				
	Enter Reviewer Comment				
	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1		
	Enter Reviewer Comment				
	Total		17.00		



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.c.i

Project Snapshot				
Project Domain Domain 4: Population-wide Projects: New York's				
Project ID	4.c.i			
Project Title	Decrease HIV morbidity			

Payment Snapshot	
DY5, Q4 Payment Available	\$ 109,499
DY5, Q4 Payment Earned	\$ 109,499

4.c.i Scoresheet												
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY5)	Domain Funding % (DY5, Q4)	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	11.00	11.00	100%	100%	100%	109,499	109,499			
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%	109,499	109,499			
Total Complete		16.00	16.00	100%	100%	100%	109,499	109,499				

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

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



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	Enter Reviewer Comment		
	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
	Enter Reviewer Comment		
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Enter Reviewer Comment		
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		
•	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
	Enter Reviewer Comment		



Save & Return

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•	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1	
	Enter Reviewer Comment			
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1	
	Enter Reviewer Comment			
•	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1	
	Enter Reviewer Comment			
Total				