

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

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

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



Print Summary

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

	PPS Information					
Quarter	DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)					
PPS	Staten Island Performing Provider System, LLC					
PPS Number	43					

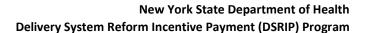
Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Data		Payme	Payment Data				
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY5, Q4 Payment Available	DY5, Q4 Payment Earned				
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment				
2.a.iii	20.00	15.75	0.00	15.75	\$ 927,108	\$ 560,668				
2.b.iv	20.00	15.75	0.00	15.75	\$ 882,511	\$ 533,699				
2.b.vii	20.00	15.75	0.00	15.75	\$ 821,163	\$ 496,598				
2.b.viii	20.00	15.75	0.00	15.75	\$ 914,725	\$ 553,180				
2.d.i	13.00	10.25	0.00	10.25	\$ 784,543	\$ 282,926				
3.a.i	25.00	19.00	0.00	19.00	\$ 784,232	\$ 360,747				
3.a.iv	25.00	19.00	0.00	19.00	\$ 750,618	\$ 345,284				
3.c.i	17.00	14.33	0.00	14.33	\$ 619,654	\$ 371,792				
3.g.ii	14.00	14.00	0.00	14.00	\$ 538,153	\$ 538,153				



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

4.a.iii	16.00	16.00	0.00	16.00	\$ 439,349	\$ 439,349
4.b.ii	22.00	22.00	0.00	22.00	\$ 373,447	\$ 373,447
AV Adjustments (Column F)						
Total	212.00	177.58	0.00	177.58	\$ 7,835,503	\$ 4,855,844





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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

Do	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		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed	Pass & Complete			



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



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

	Section 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				



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

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



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Updates						
		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,	12/31/2015	N/A	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	In Process	Pass & Ongoing
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
unving)						
		8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete



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	9. Inclusion of CBOs in PPS Implementation	N/A	N/A	In Process	Pass & Ongoing	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Additional Governance -						
Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	NA
	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	



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

		Section 04	- Cultural 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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		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
ultural ompetency							N/A
Health iteracy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	IN/A
opic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

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



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



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

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



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

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.	12/31/2015	N/A	Complete	Pass & Complete			



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Practitioner Engagement	•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	3/31/2016	N/A	Complete	Pass & Complete	N/A
_		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner							
ingagement 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 Staten Island Performing Provider System, LLC - Domain 1 Organizational AVs

Total 0

		Section	n 08 - Population I	Health Managen	nent		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Develop population health management roadmap.	6/30/2016	N/A	Complete	Pass & Complete	N/A
Population							11/7
Health		2. Finalize PPS-wide bed reduction plan.	3/31/2016	N/A	Complete	Pass & Complete	N/A
	•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Population Health Topic Areas							N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	11//



į.	Print				Staten Island Performing Provider System, LLC - Domain 1 Organization				
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing			
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing			
Total							0		

			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'.	12/31/2015	N/A	Completed	Pass & Complete	N/A
Clinical Integration							IN/A
		2. Develop a Clinical Integration strategy.	3/31/2016	N/A	Completed	Pass & Complete	N/A
							.,,,,
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	



Save & Return

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Additional Clinical Integration Topic Areas							N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	17/0
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0



Save & Return

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AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AV	Awarded	Adjusted	Net A	/s Awarded	
Adjustment	Project	Projects	Available	Net	Percentage		Net	Dorcontago AV	
	S Project	Selected	Available	Awarded	AV	AVS	Awarded	Percentage AV	
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%	
Project Adjustments (applied to one project only)	Various	11.00	157.00	122.58	78%	0.00	122.58	78%	
Total			212.00	177.58	84%	0.00	177.58	84%	

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



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 927,108
DY5, Q4 Payment Earned	\$ 560,668

	2.a.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%					
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%	64,898	64,898	
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	5.75	58%	93%	93%	862,210	495,771	
	Domain 2 Subtotal			10.75	72%	100%	100%	927,108	560,668	
	Total Complete			15.75	79%	100%	100%	927,108	560,668	

Total Project 2.a.iii AVs Awarded: 15.75 out of 20

Hide Reviewer Comments

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



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

	Domain 1 Project Prescribed N	Milestones - F	Project 2.a.iii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment							
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



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	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Rev	iewer Comme	nt						
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
•	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
•	9. Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	Total					0.00			



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	Domain 2 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Enter Reviewer Comment		
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		5.00

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



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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 19 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 24 months	Fail	C
Enter Reviewer Comment		
Children's Access to Primary Care- 25 months to 6 years	Fail	C
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.2
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	(
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	(
Enter Reviewer Comment		
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
Primary Care - Length of Relationship - Q3	Fail	C
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.
Enter Reviewer Comment		
Total		5.7



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 882,511
DY5, Q4 Payment Earned	\$ 533,699

			2.b.iv Score	esheet																
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%	61,776	61,776											
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	5.75	58%	93%	93%	820,736	471,923											
	Domain 2 Subtotal			10.75	72%	100%	100%	882,511	533,699											
	Total	Complete	20.00	15.75	79%	100%	100%	882,511	533,699											

Total Project 2.b.iv AVs Awarded: 15.75 out of 20

Hide Reviewer Comments

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



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

	Domain 1 Project Prescribed I	Milestones - F	Project 2.b.iv					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure required social services participate in the project.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	9/30/2016	9/30/2016	Completed	Pass & Complete	N/A		



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

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

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

	Domain 2 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Total 5					

Domain 2 Pay for Performance



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AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Fail	0
	Enter Reviewer Comment		
	Adult Access to Preventive or Ambulatory Care - 65 and older	Fail	0
	Enter Reviewer Comment		
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Pass & Ongoing	1
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Fail	0
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Enter Reviewer Comment		
	Primary Care - Length of Relationship - Q3	Fail	0



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Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		5.75



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 821,163
DY5, Q4 Payment Earned	\$ 496,598

	2.b.vii 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 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	57,481	57,481
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	5.75	58%	93%	93%	763,682	439,117
	Domain 2 Subtotal			10.75	72%	100%	100%	821,163	496,598
	Total	Complete	20.00	15.75	79%	100%	100%	821,163	496,598

Total Project 2.b.vii AVs Awarded: 15.75 out of 20

Hide Reviewer Comments

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



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

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



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	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Revi	iewer Comme	nt			
	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	9/30/2017	9/30/2017	Completed	Fail	N/A
	Enter Reviewer Comment					
	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
	Total					0.00

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



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Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Pass & Ongoing	1
Enter Reviewer Comment		
Total		5.00

	Domain 2 Pay for Performance		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	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 19 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		



Save & Return

H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comn	nent	
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Enter Reviewer Comn	nent	
Potentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comn	nent	
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comn	nent	
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comn	nent	
Primary Care - Length of Relationship - Q3	Fail	0
Enter Reviewer Comn	nent	
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Enter Reviewer Comn	nent	
Total		5.75



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

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

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

Payment Snapshot					
DY5, Q4 Payment Available	\$	914,725			
DY5, Q4 Payment Earned	\$	553,180			

	2.b.viii 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%				-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal			5.00	100%	0%	0%	-	-
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	64,031	64,031
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	5.75	58%	93%	93%	850,694	489,149
	Domain 2 Subtotal			10.75	72%	100%	100%	914,725	553,180
	Total Complete			15.75	79%	100%	100%	914,725	553,180

Total Project 2.b.viii AVs Awarded: 15.75 out of 20

Hide Reviewer Comments

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



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



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



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

	Domain 2 Pay for Reporting		
AV Driving	Measure	Reviewer Status	AVs Awarded
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Enter Reviewer Comment		
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		5.00

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



Save & Return

Print Staten Island Performing	g Provider System, LLC - Pr	oject 2.b.viii
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 19 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 24 months	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 25 months to 6 years	Fail	0
Enter Reviewer Comment		
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
Enter Reviewer Comment		
H-CAHPS – Care Transition Metrics	Fail	0
Enter Reviewer Comment		
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Enter Reviewer Comment		
Potentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comment		
PDI 90– Composite of all measures +/-	Fail	0
Enter Reviewer Comment		



Save & Return

Print Staten Island Performing	g Provider System, LLC - Pr	oject 2.b.vIII
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		5.75



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 784,543
DY5, Q4 Payment Earned	\$ 282,926

	2.d.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 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	7%	7%	54,918	54,918	
Donaldii 2	Domain 2 Pay for Performance (P4P	Complete	4.00	1.25	31%	93%	93%	729,625	228,008	
	Domain 2 Subtotal			5.25	66%	100%	100%	784,543	282,926	
Total Complete			13.00	10.25	79%	100%	100%	784,543	282,926	

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

Hide Reviewer Comments

	Domain 1 Project Milestones - Project 2.d.i								
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			
	Enter Reviewer Comment								

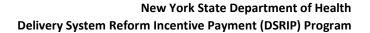


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	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A		
	Enter Reviewer Comment							
	Total							

	Domain 1 Project Prescribed Milestones - Project 2.d.i							
AV Driving	ng Project Requirement and Metric/Deliverable D		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
•	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		



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Enter Reviewer Comment							
5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Rev	iewer Comme	ent					
6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Along with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Rev	iewer Comme	ent					
7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
8. Include beneficiaries in development team to promote preventive care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
9. Measure PAM® components	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							

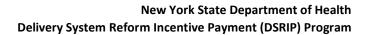




Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

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

Print 11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, Pass & Complete 3/31/2017 3/31/2017 Completed N/A community healthcare resources (including for primary and preventive services) and patient education. Enter Reviewer Comment 12. Develop a process for Medicaid recipients and project participants 3/31/2017 3/31/2017 Completed Fail N/A to report complaints and receive customer service. Enter Reviewer Comment 13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the Pass & Complete 3/31/2017 3/31/2017 Completed N/A PAM®. Enter Reviewer Comment 14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community 3/31/2017 3/31/2017 Completed Pass & Complete N/A events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services Enter Reviewer Comment 15. Inform and educate navigators about insurance options and Pass & Complete 3/31/2017 3/31/2017 Completed N/A healthcare resources available to UI, NU, and LU populations. Enter Reviewer Comment 16. Ensure appropriate and timely access for navigators when Pass & Complete 3/31/2017 3/31/2017 Completed N/A attempting to establish primary and preventive services for 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		



Print	, ,	•		
PAM Level	Pass & Ongoing	1		
Enter Reviewer Comment				
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1		
Enter Reviewer Comment				
Total		4.00		

	Domain 2 Pay for Performance - Project 2.d.i		
AV Driving	Measure	Reviewer Status	AVs Awarded
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Fail	0
	Enter Reviewer Comment		
	ED use by uninsured	Fail	0
	Enter Reviewer Comment		
	PAM Level	Pass & Ongoing	0.50
	Enter Reviewer Comment		
	Use of primary and preventive care services Percent of attributed Medicaid members with no claims history	Fail	0
	Enter Reviewer Comment		
	Total		1.25



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 784,232
DY5, Q4 Payment Earned	\$ 360,747

	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%	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 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	78,423	78,423
Domain 5	Domain 3 Pay for Performance	Complete	10.00	4.00	40%	90%	90%	705,809	282,324
	Domain 3 Subtotal			14.00	70%	100%	100%	784,232	360,747
	Total	Complete	25.00	19.00	76%	100%	100%	784,232	360,747

Total Project 3.a.i AVs Awarded: 19 out of 25

Hide Reviewer Comments

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

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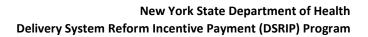
Print		Statemis	idiid i erjoriii	ing Frovider System, LLC -	rroject s.u.i	
Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Please Select	N/A	
Enter Reviewer Comment						
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A	
Enter Reviewer Comment						
Total						

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



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

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





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

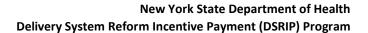


Print Print	mig r rovider System, LLC -	ojece G.u
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00

Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0			



Print Print					
Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5			
Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5			
Couding and Manitoning for Doorle with Couding and Disease and Cahinanhagain	Dans Q Ongoing	4			
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1			
Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0			
the boundary of the boundary o					
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			
Falley, you often begritalization for Montal Illiana, within 7 days	r-:I	0			
Follow-up after hospitalization for Mental Illness - within 7 days	Fail	0			
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Fail	0			
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Fail	0			
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Fail	0			
Initiation of Alcohol and Other Drug Dependence Treatment (1 vicit within 14 days)	Fail	0			
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0			
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1			
		_			
Screening for Clinical Depression and follow-up	Pass & Ongoing	1			
Total		4.00			





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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)
Staten Island Performing Provider System, LLC - Project 3.a.iv

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 750,618
DY5, Q4 Payment Earned	\$ 345,284

	3.a.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%	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%	75,062	75,062					
Domain 5	Domain 3 Pay for Performance (P4P	Complete	10.00	4.00	40%	90%	90%	675,557	270,223					
	Domain 2 Subtotal			14.00	70%	100%	100%	750,618	345,284					
Total Complete		25.00	19.00	76%	100%	100%	750,618	345,284						

Total Project 3.a.iv AVs Awarded: 19 out of 25

Hide Reviewer Comments

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



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

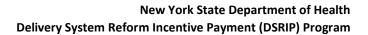
	Domain 1 Project Prescribed Milestones - Project 3.a.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated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



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

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





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	Antidepressant Medication	Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5		
				ı		
	Antidepressant Medication	Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5		
				<u> </u>		
	Cardiovascular Monitoring 1	for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1		
	Diabetes Monitoring for Ped	ople with Diabetes and Schizophrenia	Pass & Ongoing	1		
	Diabetes Screening for Peop	ole with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1		
	Diabetes Scieening for Feor	one with Schizophilenia of Bipolar Disease who are Osing Antipsychotic Medication	rass & Oligonig	1		
	Follow-up after hospitalizat	ion for Mental Illness - within 30 days	Pass & Ongoing	0.5		
	Follow-up after hospitalizat	ion for Mental Illness - within 7 days	Pass & Ongoing	0.5		





Print Staten Island Performi	ng Provider System, LLC - F	roject 3.a.iv
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
Screening for Clinical Depression and follow-up	Pass & Ongoing	1
Total		10.00
Total		10.0

	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	Pass & Ongoing	0.5						



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Antidepressant Medication Management - Effective Continuation Phase 1	reatment	Pass & Ongoing	0.5	
Cardiovascular Monitoring for People with Cardiovascular Disease and Sc	nizophrenia	Pass & Ongoing	1	
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	
Falley, we often he spitalization for Mantel Illness, within 20 days		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	
Follow-up care for Children Prescribed ADHD Medications - Continuation	Phase	Fail	0	
 Follow-up care for Children Prescribed ADHD Medications - Initiation Pha	50	Fail	0	
Tollow-up care for Crimaren Frescribed ADFID Medications - Initiation Fra	30	i an	U	
Engagement of Alcohol and Other Drug Dependence Treatment (initiation	n and 2 visits within 44 days)	Fail	0	
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within	n 14 days)	Fail	0	
 Potentially Preventable Emergency Department Visits (for persons with B	H diagnosis) ±	Pass & Ongoing	1	
- Steintainy Freventable Emergency Department Visits (for persons with Bir diagnosis) =			-	
Screening for Clinical Depression and follow-up		Pass & Ongoing	1	
Total			4.00	



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

Staten Island Performing Provider System, LLC - Project 3.c.i

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 619,654
DY5, Q4 Payment Earned	\$ 371,792

3.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%				
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	100%	0%	0%	-	-	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	10%	61,965	61,965	
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	6.00	3.33	56%	90%	90%	557,689	309,827	
	Domain 3 Subtotal			9.33	78%	100%	100%	619,654	371,792	
Total Complete		Complete	17.00	14.33	84%	100%	100%	619,654	371,792	

Total Project 3.c.i AVs Awarded: 14.33 out of 17

Hide Reviewer Comments

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

Save & Return

Print Staten Island Performing Provider System, LLC - Project 3.c.1								
	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 3.c.i							
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comme	ent						
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment							
•	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Pass & Complete	N/A			



Print							
Enter Reviewer Comment							
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2018	Completed	Pass & Complete	N/A			
Enter Reviewer 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.	3/31/2018	Completed	Pass & Complete	N/A			
Enter Reviewer Comment							
Total							

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



Save & Return

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

Staten Island Performing Provider System, LLC - Project 3.c.i

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

Domain 3 Pay for Performance



Save & Return

Print

AV Driving	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	
			1
	Comprehensive Diabetes screening – All Three Tests	Fail	0
I F	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1
<u> </u>	Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.33333333
	Health Literacy - Describing How to Follow Instructions	Pass & Ongoing	0.33333333
		-	
	Health Literacy - Explained What To Do If Illness Got Worse	Pass & Ongoing	0.33333333
	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Fail	0
		5 3	-
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Fail	0
	Medical Assistance with Smaking and Tahasaa Has Cossation Discussed Cossation Strategies	Doss 9 Ongoins	0.2222222
	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.33333333
	Prevention Quality Indicator # 1 (DM Short term complication) ±	Fail	0
	revention quality malcator # 1 (DIVI Short term complication) 1	I all	U
	Total		3.33



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 538,153
DY5, Q4 Payment Earned	\$ 538,153

	3.g.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% 0%	-	-							
	Patient Engagement Speed	N/A	N/A	N/A	0%											
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-							
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	10%	53,815	53,815							
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	4.00	4.00	100%	90%	90%	484,338	484,338							
	Domain 2 Subtotal			9.00	100%	100%	100%	538,153	538,153							
	Total	Complete	14.00	14.00	100%	100%	100%	538,153	538,153							

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

Hide Reviewer Comments

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



Print Staten Island Performing Provider System, LLC - Project 3.g.ii							
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A		
Enter Rev.	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 - I	Project 3.g.ii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	including Hospice, to bring the palliative care supports and services into the	12/31/2015	12/31/2015	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



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

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



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

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

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Total 5.00

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



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

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

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 439,349
DY5, Q4 Payment Earned	\$ 439,349

	4.a.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%				
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 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	100%	100%	439,349	439,349
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%	439,349	439,349
	Total Complete			16.00	100%	100%	100%	439,349	439,349

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

Hide Reviewer Comments

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



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



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



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

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

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

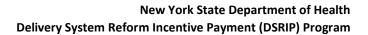
Payment Snapshot	
DY5, Q4 Payment Available	\$ 373,447
DY5, Q4 Payment Earned	\$ 373,447

	4.b.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%				
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 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	100%	100%	373,447	373,447
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%	373,447	373,447
	Total Complete			22.00	100%	100%	100%	373,447	373,447

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

Hide Reviewer Comments

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



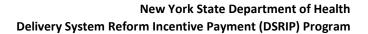


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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)

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

Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics Pass & Ongoing 1 Enter Reviewer Comment Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics Pass & Ongoing 1 Enter Reviewer Comment Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years Pass & Ongoing 1 Enter Reviewer Comment Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years - Ratio of Black non-Hispanics to Pass & Ongoing 1 White non-Hispanics Enter Reviewer Comment Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years - Ratio of Hispanics to White non-Pass & Ongoing 1 Hispanics Enter Reviewer Comment Percentage of adults with health insurance - Aged 18-64 years Pass & Ongoing 1 Enter Reviewer Comment Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years Pass & Ongoing 1 Enter Reviewer Comment Percentage of adults who are obese Pass & Ongoing 1





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



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

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

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	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1
	Enter Reviewer Comment		
	Total		17.00