

Achievement Value (AV) Scorecard Westchester Medical Center

General Instructions								
Step	Description/Link	Image						
1. Enable Content	Click "Enable Content" at the top of the screen to enable macros.	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
	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Link (click on the purple fink below to access each individual project report) Domain I: Organizational (All Projectal) AV Adjustments (Column F) 2 as 2 ass 2 ass 2 ass 2 ass 2 ass
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



Print Summary

Print All

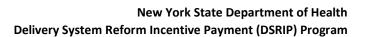
Achievement Value (AV) Scorecard Westchester Medical Center

PPS Information					
Quarter	DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter)				
PPS	Westchester Medical Center				
PPS Number	21				

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Data		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	13.25	0.00	13.25	\$ 1,304,308	\$ 485,529				
2.a.iii	20.00	13.25	0.00	13.25	\$ 1,071,396	\$ 398,827				
2.a.iv	20.00	13.25	0.00	13.25	\$ 1,257,725	\$ 468,188				
2.b.iv	20.00	13.25	0.00	13.25	\$ 1,001,522	\$ 372,817				
2.d.i	13.00	10.75	0.00	10.75	\$ 1,159,483	\$ 552,929				
3.a.i	24.00	15.50	0.00	15.50	\$ 897,979	\$ 134,697				
3.a.ii	24.00	15.50	0.00	15.50	\$ 861,775	\$ 129,266				
3.c.i	17.00	12.00	0.00	12.00	\$ 698,736	\$ 174,684				
3.d.iii	13.00	10.00	0.00	10.00	\$ 722,028	\$ 234,659				



Print Summary Print All					Α		(AV) Scorecard Medical Center
4.b.i	22.00	22.00	0.00	22.00	\$	535,698	\$ 535,698
4.b.ii	22.00	22.00	0.00	22.00	\$	395,951	\$ 395,951
AV Adjustments (Column F)							
Total	215.00	160.75	0.00	160.75	\$	9,906,601	\$ 3,883,244



NEW YORK STATE Of Health Medicaid Redesign Team

Save & Return

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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



	 ·						
	Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing		
_							
	Create a workforce transition roadmap for achieving defined target workforce	12/31/2016	N/A	Completed	Pass & Complete		
Additional	Perform detailed gap analysis between current state assessment of workforce	3/31/2017	N/A	Completed	Pass & Complete		
Workforce Strategy	and projected future state			·	·		
Budget Updates							
(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						
			I	I			
	5. Develop training strategy	3/31/2017	N/A	Completed	Pass & Complete		
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		



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	Prin	t				_	
-		Major Dependencies on Organizational					
		Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional Vorkforce	•	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
trategy opic Areas	•	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
_	•	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
-	•	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

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	9/30/2016	N/A	Completed	Pass & Complete	
		2. Establish a clinical governance					
Governance		structure, including clinical quality	12/31/2015	N/A	Completed	Pass & Complete	
Structure		committees for each DSRIP project					



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

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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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



Print

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



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

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



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

		Sec	tion 05 - IT Systen	ns and Processe	S		
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).	12/31/2016	N/A	Complete	Pass & Complete	
		Develop an IT Change Management	12/31/2016	N/A	Complete	Pass & Complete	
T Systems	•	Strategy.			,		
nd Processes		3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	12/31/2016	N/A	Complete	Pass & Complete	N/
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



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Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							N/A
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			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Establish reporting structure for PPS-wide performance reporting and communication.	9/30/2016	N/A	Completed	Pass & Complete	N/A
Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2016	N/A	Completed	Pass & Complete	N/A



	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	<u> </u>					
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
1100	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional erformanc						N/A
Reporting opic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

		Sec	tion 07 - Practitio	ner Engagement			
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AN/ Asserted
Measure	Driving	Milestone	Date	Date	Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Completed	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.	6/30/2016	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	
dditional ractitioner							
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 Westchester Medical Center - Domain 1 Organizational AVs

Total 0

		Section	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.	N/A	N/A	In Process	Pass & Ongoing	N/A
Population							IV/A
Health		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	,



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

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



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



Save & Return

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

Print

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AV	Awarded	Adjusted	Net A	AVs Awarded
Adjustment	Project	Projects	Available	Net	Percentage		Net	
	Project	Selected	Available	Awarded	Awarded AV Awar	Awarded	Percentage AV	
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	160.00	105.75	66%	0.00	105.75	66%
Total			215.00	160.75	75%	0.00	160.75	75%

Hid	e Reviewer Comments	Organizational	Project Adjustments				
	No AV Adjustments						
	Please note that there are no AV adjustments for Westchester Medical Center in DY2, Q1						



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

Westchester Medical Center - 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	\$ 1,304,308
DY5, Q4 Payment Earned	\$ 485,529

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%		-	-
	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%	91,302	91,302
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.25	33%	93%	93%	1,213,006	394,227
	Domain 2 Subtotal			8.25	55%	100%	100%	1,304,308	485,529
	Total	Complete	20.00	13.25	66%	100%	100%	1,304,308	485,529

Total Project 2.a.i AVs Awarded: 13.25 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								



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

	Domain 1 Project Prescribed N	lilestones - P	roject 2.a.i					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. All PPS providers must be included in the Integrated Delivery System.							
	The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network;	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	additionally, the IDS structure must include payers and social service	3/31/2010	3/31/2010	Completed	1 ass & complete	IN/A		
	organizations, as necessary to support its strategy.							
	Enter Reviewer Comment							
	2. Utilize partnering HH and ACO population health management							
	systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure patients receive appropriate health care and community							
	support, including medical and behavioral health, post-acute care, long	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	term care and public health services.							
		wer Commer	it					
	4. Ensure that all PPS safety net providers are actively sharing EHR							
	systems with local health information exchange/RHIO/SHIN-NY and	2/24/2040	2/24/2040	C - +	Dass & Campleta	N1 / A		
	sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	end of Demonstration Year (DY) 3.							



Enter Reviewer Comment							
5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commer	nt					
6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commer	nt					
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 Revie	wer Commer	nt					
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	Fail	N/A		
Enter Reviewer Comment							



11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	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			



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	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	Pass & Ongoing	1
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 25 months to 6 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 7 to 11 years	Fail	0
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 19 years	Fail	0
	Enter Reviewer Comment		
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	1
	Enter Reviewer Comment		
	H-CAHPS – Care Transition Metrics	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Emergency Room Visits	Fail	0
	Enter Reviewer Comment		
	Potentially Avoidable Readmissions	Fail	0
	Enter Reviewer Comment		
	PDI 90– Composite of all measures +/-	Fail	0
	Enter Reviewer Comment		
	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
	Enter Reviewer Comment		



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Primary Care - Length of Relationship - Q3	Fail	0
Enter Reviewer Comment		
Primary Care - Usual Source of Care - Q2	Fail	0
Enter Reviewer Comment		
Total		3.25



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

Westchester Medical Center - Project 2.a.iii

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 1,071,396
DY5, Q4 Payment Earned	\$ 398,827

	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%	0%						
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		6 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%	74,998	74,998			
Donidin 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.25	33%	93%	93%	996,398	323,829			
Domain 2 Subtotal		15.00	8.25	55%	100%	100%	1,071,396	398,827				
	Total	Complete	20.00	13.25	66%	100%	100%	1,071,396	398,827			

Total Project 2.a.iii AVs Awarded: 13.25 out of 20

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.a.iii							
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	Completed	Pass & Ongoing	N/A	



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



	Print			Westo	hester Medical Center - P	roject 2.a.iii			
	Enter Reviewer Comment								
	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	N/A			
		wer Commen	nt						
	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	7. Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
•	8. Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter 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			



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

Westchester Medical Center - Project 2.a.iii

Print

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 ±	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						



Save & Return

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

Westchester Medical Center - Project 2.a.iii

Print

Domain 2 Pay for Performance



Print

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

Westchester Medical Center - Project 2.a.iv

	Project Snapshot
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.iv
Project Title	Create a medical village using existing hospital infrastructure

Payment Snapshot	
DY5, Q4 Payment Available	\$ 1,257,725
DY5, Q4 Payment Earned	\$ 468,188

2.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 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	7%	7%	88,041	88,041
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.25	33%	93%	93%	1,169,685	380,148
	Domain 2 Subtotal			8.25	55%	100%	100%	1,257,725	468,188
	Total	Complete	20.00	13.25	66%	100%	100%	1,257,725	468,188

Total Project 2.a.iv AVs Awarded: 13.25 out of 20

Hide Reviewer Comments

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



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

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



	Print			West	chester Medical Center - P	roject 2.a.iv
•	4. Ensure that all safety net providers participating in Medical Villages 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	nt			
	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 Revie	wer Commer	nt			
	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
	Enter Revie	wer Commer	nt			
	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
Total					0.00	

Domain 2 Pay for Reporting - Project 2.a.iv						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Medicaid Spending on ER and Inpatient Services ±		1			
	Enter Reviewer Comment					
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1			



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

Westchester Medical Center - Project 2.a.iv

Print Westchester Medical Center - Project 2.0					
	Enter Reviewer Comment				
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1		
	Enter Reviewer Comment				
	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1		
	Enter Reviewer Comment				
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1		
Enter Reviewer Comment					
	Total		5.00		

Domain 2 Pay for Performance - Project 2.a.iv



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

Westchester Medical Center - 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	\$ 1,001,522
DY5, Q4 Payment Earned	\$ 372,817

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%	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%	70,107	70,107		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	3.25	33%	93%	93%	931,416	302,710		
Domain 2 Subtotal		15.00	8.25	55%	100%	100%	1,001,522	372,817			
Total Complete		20.00	13.25	66%	100%	100%	1,001,522	372,817			

Total Project 2.b.iv AVs Awarded: 13.25 out of 20

Hide Reviewer Comments

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				



Print Print									
Enter Reviewer Comment									
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	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									

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



Print Westchester Medical Center - Project									
	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								

	Domain 2 Pay for Reporting - Project 2.b.iv								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1						
	Enter Reviewer Comment								
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1						
	Enter Reviewer Comment								



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

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

Westchester Medical Center - Project 2.b.iv

Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Enter Reviewer Comment		
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
Enter Reviewer Comment		
Total		5.00

Domain 2 Pay for Performance - Project 2.b.iv



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

Westchester Medical Center - 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	\$ 1,159,483
DY5, Q4 Payment Earned	\$ 552,929

	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%	81,164	81,164
Doinain 2	Domain 2 Pay for Performance (P4P)	Complete	4.00	1.75	44%	93%	93%	1,078,320	471,765
Domain 2 Subtotal		8.00	5.75	72%	100%	100%	1,159,483	552,929	
	Total	Complete	13.00	10.75	83%	100%	100%	1,159,483	552,929

Total Project 2.d.i AVs Awarded: 10.75 out of 13

Hide Reviewer Comments

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



Print					•				
Enter Reviewer Comment									
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Please Select	N/A				
Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Please Select	N/A				
Enter Revie	ewer Commen	nt			•				
Total									

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



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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter) Westchester Medical Center - Project 2.d.i

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



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



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

	Domain 2 Pay for Reporting - Project 2.d.i						
AV Driving	Measure	Reviewer Status	AVs Awarded				
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25				
	Enter Reviewer Comment						
	ED use by uninsured	Pass & Ongoing	1				
	Enter Reviewer Comment						



Print	cnester Medical Center - I	Project 2.a.i
PAM Level	Pass & Ongoing	1
Enter Reviewer Comment		
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1
Enter Reviewer Comment		
Total		4.00

	Domain 2 Pay for Performance - Project 2.d.i		
AV Driving	Measure	Reviewer Status	AVS
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	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	Pass & Ongoing	1
	Enter Reviewer Comment		
	PAM Level	Fail	0
	Enter Reviewer Comment		
	Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for	Fail	0
	Enter Reviewer Comment		
	Total		1.75



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

Westchester Medical Center - 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	\$ 897,979
DY5, Q4 Payment Earned	\$ 134,697

	3.a.i Scoresheet								
Domain	Domain Component		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	5.00	100%	0%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	89,798	89,798
Domain 5	Domain 3 Pay for Performance Complete		9.00	0.50	6%	90%	90%	808,181	44,899
	Domain 3 Subtotal		19.00	10.50	55%	100%	100%	897,979	134,697
Total Complete			24.00	15.50	65%	100%	100%	897,979	134,697

Total Project 3.a.i AVs Awarded: 15.5 out of 24

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			



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	Ongoing	N/A	Completed	Please Select	N/A		
Enter Revie	ewer Commen	t					
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	Project Requirement and Metric/Deliverable Required Committed Milestone Due Date Due Date Status Reviewer Status						
	•	 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							
	1	Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
3.a.i Model 1		Ent	er Reviewer	Comment					



	Print				Wes	tchester Medical Center -	Project 3.a.i		
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A		
		Enter Reviewer Comment							
		4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment							
Total 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				



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

Westchester Medical Center - Project 3.a.i

Print

Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5



	Print	stchester Medical Center -	Project 3.a.i
•	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	Avarded
	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	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	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



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

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

Westchester Medical Center - Project 3.a.i

Print

Total				
	Screening for Clinical Depression and follow-up	Fail	0	
	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	rdll	U	
	Potentially Proventable Emergency Department Visits (for persons with PH diagnosis) +	Fail	0	
	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0	
	Engagement of Anomoratina Other Drag Dependence Treatment (Initiation and 2 Visits Within 11 augs)	10		
	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 - Initiation Phase	Fail	0	
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Fail	0	



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

Westchester Medical Center - 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	\$ 861,775
DY5, Q4 Payment Earned	\$ 129,266

	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%	86,177	86,177										
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	9.00	0.50	6%	90%	90%	775,597	43,089										
Domain 2 Subtotal		19.00	10.50	55%	100%	100%	861,775	129,266											
	Total	Complete	24.00	15.50	65%	100%	100%	861,775	129,266										

Total Project 3.a.ii AVs Awarded: 15.5 out of 24

Hide Reviewer Comments

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



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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					0.00	

	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.	3/31/2018	3/31/2018	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter 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		



	Print			West	chester Medical Center - I	Project 3.a.i	
	Enter Reviewer Comment						
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
•	8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
_	Enter Reviewer Comment						
	10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	



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

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

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		,
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				
	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	Pass & Ongoing	0.5				
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A				
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Fail	0				



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

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Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Quarter) Westchester Medical Center - Project 3.a.ii

Print 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 Follow-up care for Children Prescribed ADHD Medications - Continuation Phase Fail 0 Follow-up care for Children Prescribed ADHD Medications - Initiation Phase Fail 0 Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) Fail 0 Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days) Fail 0 Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ± Fail 0 Screening for Clinical Depression and follow-up Fail 0 Total 0.50



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

Westchester Medical Center - 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	\$ 698,736
DY5, Q4 Payment Earned	\$ 174,684

	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	5.00	100%	0%	0%	-	-		
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	10%	69,874	69,874		
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	6.00	1.00	17%	90%	90%	628,863	104,810		
Domain 2 Subtotal		12.00	7.00	58%	100%	100%	698,736	174,684			
	Total	Complete	17.00	12.00	71%	100%	100%	698,736	174,684		

Total Project 3.c.i AVs Awarded: 12 out of 17

Hide Reviewer Comments

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



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



Print		wes	tchester Medical Center -	Project 3.c.i	
Enter Reviewer Comment					
5. Ensure coordination with the Medicaid Managed Care organizations serving the target population.	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment					
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment					
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2017	Completed	Fail	N/A	
Enter Reviewer Comment					
Total					

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



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T THIC		
Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.3333333
Health Literacy - Describing How to Follow Instructions	Pass & Ongoing	0.3333333
Health Literacy - Explained What to do if Illness Got Worse	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1
Total		6.00



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

Westchester Medical Center - Project 3.d.iii

	Project Snapshot						
Project Domain Clinical Improvement Projects (Domain 3)							
Project ID	3.d.iii						
Project Title	Implementation of evidence-based medicine guidelines for asthma management						

Payment Snapshot	
DY5, Q4 Payment Available	\$ 722,028
DY5, Q4 Payment Earned	\$ 234,659

	3.d.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%			
Domain 1	Project Implementation Speed	N/A	N/A	N/A	0%		0%	-	-
	Patient Engagement Speed	N/A	N/A	N/A	0%				
	Domain 1 Subtotal		5.00	5.00	100%	0%	0%	-	-
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	72,203	72,203
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	4.00	1.00	25%	90%	90%	649,825	162,456
	Domain 2 Subtotal		8.00	5.00	63%	100%	100%	722,028	234,659
	Total	Complete	13.00	10.00	77%	100%	100%	722,028	234,659

Total Project 3.d.iii AVs Awarded: 10 out of 13

Hide Reviewer Comments

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



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



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	4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
Total					0.00		

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

	Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVS				
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1				
	P4P Measure DY3Q4						
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Fail	0				



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

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P4P Measure DY3Q4		
Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Fail	0
P4P Measure DY3Q4		
Pediatric Quality Indicator # 14 Pediatric Asthma ±	Fail	0
Prevention Quality Indicator # 15 Younger Adult Asthma ±	Fail	0
Total		1.00



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

Westchester Medical Center - Project 4.b.i

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

Payment Snapshot	
DY5, Q4 Payment Available	\$ 535,698
DY5, Q4 Payment Earned	\$ 535,698

	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%	535,698	535,698	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal		17.00	17.00	100%	100%	100%	535,698	535,698	
	Total Complete			22.00	100%	100%	100%	535,698	535,698	

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

Hide Reviewer Comments

	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
-			



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

Save & Return Achievement Value (AV) Scorecard DY5, Q4 January 1, 2020 - March 31, 2020 (Payment Qua Westchester Medical Center - Project						
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)

Westchester Medical Center - Project 4.b.ii

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

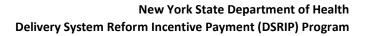
Payment Snapshot	
DY5, Q4 Payment Available	\$ 395,951
DY5, Q4 Payment Earned	\$ 395,951

	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%	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%	395,951	395,951	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal		17.00	17.00	100%	100%	100%	395,951	395,951	
	Total Complete			22.00	100%	100%	100%	395,951	395,951	

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

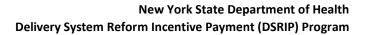
Hide Reviewer Comments

	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		





Print Westchester Medical Center - Project 4.b.i			
	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		





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

Westchester Medical Center - Project 4.b.ii

Print 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-Pass & Ongoing 1 75 years 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



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

Save & Return

	Print		_
	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			