

Achievement Value (AV) Scorecard The New York Presbyterian Hospital of Queens

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 Unit (Edit Conto purple final beliow to access conto biological project report) Structure (All Projects) 2 a 1 2 a 1
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



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

> Achievement Value (AV) Scorecard The New York Presbyterian Hospital of Queens

	PPS Information					
Quarter DY1, Q4 January 1, 2016 - March 31, 2016						
PPS	The New York Presbyterian Hospital of Queens					
PPS Number	40					

	Achiev	ement Value (AV) Scorecard	Summary					
		AV [Data		Payment Data				
Project Link (click on the purple link below to access each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned	
Domain I - Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizati	-	e embedded w payment	ithin each	
2.a.ii	20.00	20.00	0.00	20.00	\$43,903.72	\$43,903.72	\$-	\$43,903.72	
2.b.v	20.00	20.00	0.00	20.00	\$54,694.11	\$54,694.11	\$-	\$54,694.11	
2.b.vii	20.00	20.00	0.00	20.00	\$49,176.14	\$49,176.14	\$ -	\$49,176.14	
2.b.viii	20.00	20.00	0.00	20.00	\$51,250.88	\$51,250.88	\$-	\$51,250.88	
3.a.i	16.00	16.00	0.00	16.00	\$44,256.16	\$44,256.16	\$-	\$44,256.16	
3.b.i	13.00	13.00	0.00	13.00	\$33,082.18	\$33,082.18	\$-	\$33,082.18	
3.d.ii	10.00	10.00	0.00	10.00	\$35,739.23	\$35,739.23	\$-	\$35,739.23	
3.g.ii	7.00	7.00	0.00	7.00	\$31,410.35	\$31,410.35	\$-	\$31,410.35	
4.c.ii	16.00	16.00	0.00	16.00	\$23,984.33	\$23,984.33	\$-	\$23,984.33	

YORK STATE Department of Health Medicaid Redesign Team				New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program
Print Summary Print All				Achievement Value (AV) Scorecard The New York Presbyterian Hospital of Queens
AV Adjustments (Column F)				
Total	142.00	142.00	0.00	142.00 \$ 367,497 \$ 367,497 \$ - \$ 367,497



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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

De	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	3/30/2016	9/30/2016	In Process	Pass & Ongoing				
Workforce Strategy		Workforce Impact Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing				
Budget Updates			-							



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	New Hire Employment Analysis and Updates	6/30/2016	9/30/2016	In Process	Pass & Ongoing
	1. Define target workforce state (in line				
	with DSRIP program's goals)	6/30/2016	3/31/2016	In Process	Pass & Ongoing
	2. Create a workforce transition roadmap for achieving defined target workforce	12/31/2016	6/30/2016	In Process	Pass & Ongoing
Additional Workforce	3. Perform detailed gap analysis between current state assessment of workforce	3/31/2017	3/31/2016	In Process	Pass & Ongoing
Strategy	and projected future state				
Budget Jpdates					
(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	N/A	N/A	In Process	Pass & Ongoing
	partial placements				
	5. Develop training strategy	12/31/2016	9/30/2016	In Process	Pass & Ongoing
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

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

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



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
Quarterly Project						
Reports, Project	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	1
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				1

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

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Updates							1
-		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance		4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
Process Jpdate				-	^		
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	N/A	3/31/2016	Completed	Pass & Complete	
		6. Finalize partnership agreements or contracts with CBOs	N/A	6/30/2016	In Process	Pass & Ongoing	
dditional Governance Ailestones non AV-	•	 Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and 	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
riving)							
		8. Finalize workforce communication and engagement plan	N/A	6/30/2016	Completed	Pass (with Exception) & Ongoing	
	•	The IA does not consider this milestone com sheets to substantiate the completion of Go	•	•	training materia	Is and /or training sign in	



Delivery System Reform Incentive Payment (DSRIP) Program

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

9. Inclusion of CBOs in PPS Pass & Complete N/A 12/31/2015 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 N/A Pass & Ongoing Progress Reporting N/A In Process Total 1

Section 03 - Financial Sustainability

NEW YORK STATE **Redesign Team** of Health

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Department

Medicaid



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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	9/30/2015	Completed	Pass & Complete	
Financial Stability		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	Completed	Pass & Complete	
Update							
		 Finalize Compliance Plan consistent with New York State Social Services Law 363-d 	12/31/2015	12/31/2015	Completed	Pass & Complete	1
							1
PPS Transition		4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	9/30/2016	3/31/2016	In Process	Pass & Ongoing	
to Value							
Based Payment System		5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
		6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	TBD	N/A	N/A	N/A	



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Additional						
PPS Transition to Value	 Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher 	TBD	N/A	N/A	N/A	N/A
Based Payment						
System	 ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs 	TBD	N/A	N/A	N/A	
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial						
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	



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2	Print							
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing		
					,,			
			Total				1	

		Section 04	- Cultural Compe	tency & Health	Literacy		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Finalize cultural competency / health literacy strategy. 	12/31/2015	12/31/2015	Completed	Pass & Complete	
Cultural	ral						
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	6/30/2016	In Process	Pass & Ongoing	1
		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	



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Cultural Competency	-						N/A
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	NA
Topic Areas							
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

	Section 05 - IT Systems and Processes								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awa		
	•	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).	N/A	3/31/2016	Completed	Pass & Complete			
۲ Systems	•	 Develop an IT Change Management Strategy. The IA does not consider this milestone cor sheets to substantiate the completion of IT 	•	•	•	Pass (with Exception) & Ongoing Ils and /or training sign in			



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

and Processes	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	3/31/2016	Completed	Pass (with Exception) & Ongoing	N/A
	The IA does not consider this milestone con	•		-	Is and /or training sign in	
	sheets to substantiate the completion of IT4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	In Process	Pass & Ongoing	
				-		
	5. Develop a data security and confidentiality plan.	N/A	3/31/2016	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	
Additional						
IT Systems and	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes						
Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
			-			
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



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

	Total	0

		Sei	ction 06 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		 Establish reporting structure for PPS- wide performance reporting and communication. 	6/30/2016	3/31/2016	In Process	Pass & Ongoing	N/A
Doufoursons							
Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2016	3/31/2016	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 Performanc							N/A



Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

e Reporting Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	11/74
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		·	·			
		Total				0

	Section 07 - Practitioner Engagement							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded	
		1. Develop Practitioners communication and engagement plan.	N/A	3/31/2016	Completed	Pass & Complete		
Practitioner Engagement	•	 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. 	12/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing		

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

	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						N/A					
Engagement Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	,					
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing						
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing						
		Total				0					

	Section 08 - Population Health Management								
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded		
		 Develop population health management roadmap. 	N/A	6/30/2016	In Process	Pass & Ongoing	N/A		
Population							N/A		

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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Domain 1 Organizational AVs

		Total				0			
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing				
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing				
Health Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A			
Additional Population						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				
Health	2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	In Process	Pass & Ongoing	N/A			
			1						

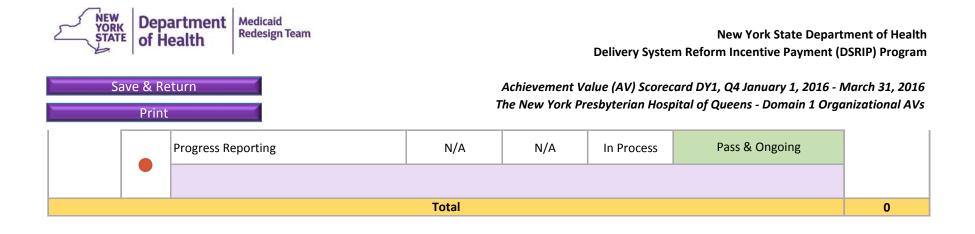
Section 09 - Clinical Integration



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform a clinical integration 'needs assessment'.	N/A	3/31/2016	Completed	Pass & Complete	N/A
Clinical Integration							
		2. Develop a Clinical Integration strategy.	N/A	9/30/2016	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 Clinical							N/A
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	





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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens AV Adjust

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs Available	Total AVs Awarded		Adjusted	Net AVs Awarded	
Adjustment	Project	Projects		Net	Percentage	Aujusteu AVs	Net	Percentage AV
	Project	Selected		Awarded	AV	AVS	Awarded	rententage AV
Organizational Adjustments (applied to all projects)	5.00	9.00	45.00	45.00	100%	0.00	45.00	100%
Project Adjustments (applied to one project only)	Various	9.00	97.00	97.00	100%	0.00	97.00	100%
Total			142.00	142.00	100%	0.00	142.00	100%

Hid	de Reviewer Comments	Organizational	Project Adjustments				
	No AV Adjustments						
	Please note that there are no AV adjustments for The New York Presbyterian Hospital of Queens in DY1, Q4						
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New York State Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.a.ii

	Project Snapshot		Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	F	Payment Available (DY1)	\$ 219,518.59
Project ID	2.a.ii		DY1 Initial Payment	\$ 131,711.16
	Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the New York State Health Innovation Plan (SHIP))		DY1 Q2 Payment Earned	\$ 43,903.72
			DY1 Payment Not Earned to Date	\$ (0.00)
Project Title			DY1 Funding Remaining	\$ 43,903.72
			Funding Available for Distribution DY1Q4	\$ 43,903.72

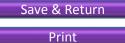
	2.a.ii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	10%	21,952	21,952
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	21,952	21,952
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	21,952	21,952
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		14.00	14.00	100%	20%	10%	21,952	21,952
	Total	Complete	20.00	20.00	100%	100%	20%	43,904	43,904

Total Project 2.a.ii AVs Awarded: 20 out of 20

Hide Reviewer Comments

	Domain 1 Project Milest	ones - Projec	t 2.a.ii			
AV Dri ving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded





Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.a.ii

Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total					1.00

	Domain 1 Project Prescribed	Milestones - I	Project 2.a.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	 Identify a physician champion with knowledge of PCMH/APCM implementation for each primary care practice included in the project. 	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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•	4. Ensure all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
•	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	In Process	Pass & Ongoing	N/A
•	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
•	7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all					
	patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	9. Implement open access scheduling in all primary care practices.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

NEW YORK STATEDepartment of HealthMedicaid Redesign Team		York State Department of Health centive Payment (DSRIP) Program
Save & Return	Achievement Value (AV) Scorecard DY1, Q4	
Print	The New York Presbyterian I	Hospital of Queens - Project 2.a.ii
	Total	0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.a.ii (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333						
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1						
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25						
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25						



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.a.ii

	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.a.ii

Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	NA
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5

STATE OF Health Medicaid Redesign Team		Delivery System Refor	New York State Departme rm Incentive Payment (DSF	
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	Primary Care - Usual Source of Care - Q2		Pass & Ongoing	0.5
		Total		14.00



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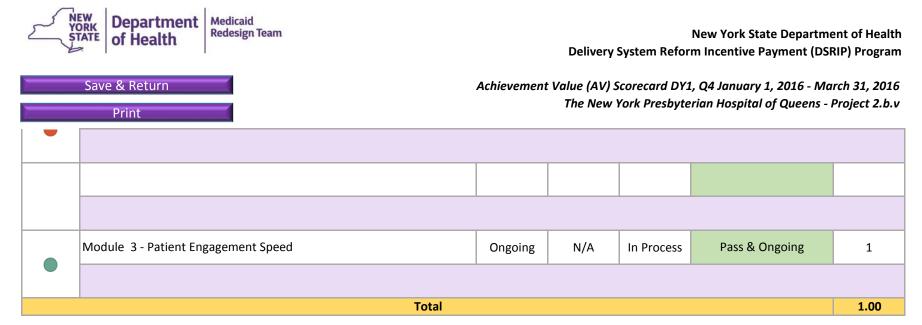
Project Snapshot			Payment Snapshot				
Project Domain	System Transformation Projects (Domain 2)		Payment Available (DY1)	\$	273,470.54		
Project ID	2.b.v		DY1 Initial Payment	\$	164,082.32		
			DY1 Q2 Payment Earned	\$	54,694.11		
Project Title	Care transitions intervention for skilled nursing facility (SNF) residents		DY1 Payment Not Earned to Date	\$	-		
Project fille			DY1 Funding Remaining	\$	54,694.11		
		Funding Available for Distribution DY1Q4	\$	54,694.11			

	2.b.v Scoresheet															
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)							
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	80%	80%	80%	80% 109						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%						10%	27,347	27,347			
	Patient Engagement Speed	Complete	1.00	1.00	100%											
	Domain 1 Subtotal			6.00	100%	80%	10%	27,347	27,347							
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	27,347	27,347							
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-							
	Domain 2 Subtotal			14.00	100%	20%	10%	27,347	27,347							
	Total Complete			20.00	100%	100%	20%	54,694	54,694							

Total Project 2.b.v AVs Awarded: 20 out of 20

Hide Reviewer Comments

Domain 1 Project Milestones - Project 2.b.v							
AV Driving	iving 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	



	Domain 1 Project Prescribed I	Milestones - I	Project 2.b.v			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Partner with associated SNFs to develop a standardized protocol to assist with resolution of the identified issues.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
•	2. Engage with the Medicaid Managed Care Organizations and Managed Long Term Care or FIDA Plans associated with their identified population to develop transition of care protocols, ensure covered services including DME will be readily available, and that there is a payment strategy for the transition of care services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
		- -	- -			
	3. Develop transition of care protocols that will include timely notification of planned discharges and the ability of the SNF staff to visit the patient and staff in the hospital to develop the transition of care services. Ensure that all relevant protocols allow patients in end-of-life situations to transition home with all appropriate services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.b.v

4. Establish protocols for standardized care record transitions to the SNF staff and medical personnel.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
5. Ensure all participating hospitals and SNFs have shared EHR system capability and HIE/RHIO/SHIN-NY access for electronic transition of medical records by the end of DSRIP Year 3.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
6. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
Total						

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.v (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333						



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.b.v

CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5



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H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	NA
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1



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Potentially Avoidable Readmissions	Pass & Ongoing	1
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total		14.00



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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.b.vii

	Project Snapshot	Payment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	Payment Available (DY1)	\$ 245,880.70
Project ID	2.b.vii	DY1 Initial Payment	\$ 147,528.42
		DY1 Q2 Payment Earned	\$ 49,176.14
Project Title	Implementing the INTERACT project (inpatient	DY1 Payment Not Earned to Date	\$ (0.00)
Project fille	transfer avoidance program for SNF)	DY1 Funding Remaining	\$ 49,176.14
		Funding Available for Distribution DY1Q4	\$ 49,176.14

	2.b.vii Scoresheet														
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)						
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%	24,588	24,588						
	Patient Engagement Speed	Complete	1.00	1.00	100%										
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	24,588	24,588						
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	24,588	24,588						
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-						
Domain 2 Subtotal		14.00	14.00	100%	20%	10%	24,588	24,588							
	Total	Complete	20.00	20.00	100%	100%	20%	49,176	49,176						

Total Project 2.b.vii AVs Awarded: 20 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

New York State Department of He STATEMedicaid Redesign TeamNew York State Department of He Delivery System Reform Incentive Payment (DSRIP) Program						
	Save & Return Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March The New York Presbyterian Hospital of Queens - Proje					
	Print		The New To	ork Presbylen	ian Hospital of Queens - Pi	oject 2.0.vii
	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					1.00

	Domain 1 Project Prescribed Milestones - Project 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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
	2. Identify a facility champion who will angage other staff and sorve as						
	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2016	In Process	Pass & Ongoing	N/A	
	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	In Process	Pass & Ongoing	N/A	
	4. Educate all staff on care pathways and INTERACT principles.	3/31/2017	3/31/2016	In Process	Pass & Ongoing	N/A	



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.b.vii

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	In Process	Pass & Ongoing	N/A
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. Educate patient and family/caretakers, to facilitate participation in	2/24/2047				
planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
9. Measure outcomes (including quality assessment/root cause analysis					
of transfer) in order to identify additional interventions.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
 10. Use EHRs and other technical platforms to track all patients					
engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total					0.00

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.vii (all Milestones are P4R in DY1)



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AV Driving	Measure	Reviewer Status	AVs Awarded
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25



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Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1



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Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	NA
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1
		-
PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total		14.00



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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 2.b.viii

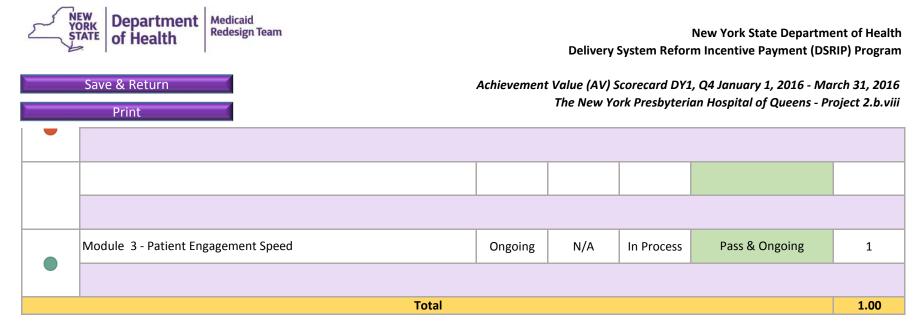
	Project Snapshot	Pa	ayment Snapshot	
Project Domain	System Transformation Projects (Domain 2)	Payment Available (DY1)		\$ 256,254.38
Project ID	2.b.viii	DY1 Initial Payment		\$ 153,752.63
		DY1 Q2 Payment Earned		\$ 51,250.88
	Hospital-Home Care Collaboration Solutions	DY1 Payment Not Earned to Date		\$ 0.00
Project Title		DY1 Funding Remaining		\$ 51,250.88
		Funding Available for Distribution	DY1Q4	\$ 51,250.88

			2.b.viii Scor	esheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%	80%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			80% 10%	25,625	25,625		
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	25,625	25,625			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	14.00	14.00	100%	20%	10%	25,625	25,625			
Domain 2	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-			
	Domain 2 Subtotal			14.00	100%	20%	10%	25,625	25,625			
	Total	Complete	20.00	20.00	100%	100%	20%	51,251	51,251			

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

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



	Domain 1 Project Prescribed N	1ilestones - P	roject 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.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
	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	In Process	Pass & Ongoing	N/A
	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	In Process	Pass & Ongoing	N/A



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4. Educate all staff on care pathways and INTERACT-like principles.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
 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	In Process	Pass & Ongoing	N/A
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
8. Integrate primary care, benavioral nealth, pharmacy, and other services into the model in order to enhance coordination of care and medication management	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



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	11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						0.00

	Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.viii (all Milestones are P4R in DY1)								
AV Driving	Measure	Reviewer Status	AVs Awarded						
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333						
	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333						
	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1						



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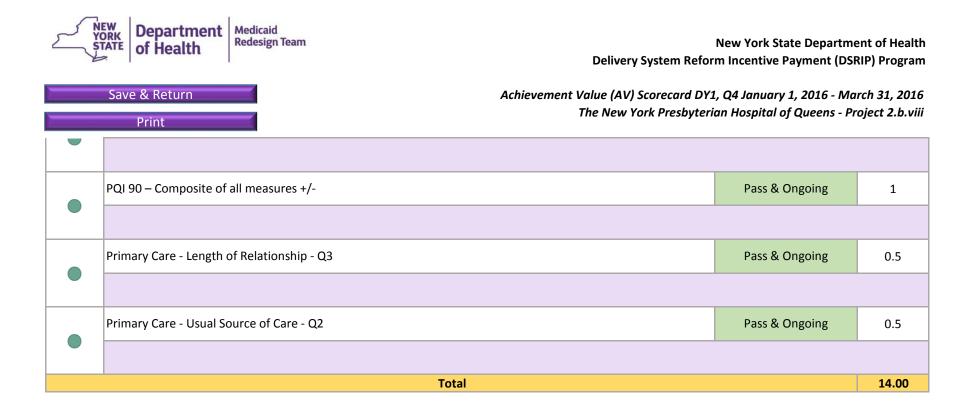
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
H-CAHPS – Care Transition Metrics	Pass & Ongoing	1



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Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
PDI 90– Composite of all measures +/-	Pass & Ongoing	1
Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	NA
Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Potentially Avoidable Readmissions	Pass & Ongoing	1





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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 3.a.i

Project Snapshot		Payment Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)	Payment Available (DY1)	\$	221,280.78		
Project ID	3.a.i	DY1 Initial Payment	\$	132,768.47		
		DY1 Q2 Payment Earned	\$	44,256.16		
Project Title	Integration of primary care and behavioral health	DY1 Payment Not Earned to Date	\$	(0.00)		
Project fille	services	DY1 Funding Remaining	\$	44,256.16		
		Funding Available for Distribution DY1Q4	\$	44,256.16		

			3.a.i Score	sheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00 5.00 100%	100%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	22,128	22,128
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	22,128	22,128
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	10%	22,128	22,128
Domain 3	Domain 3 Pay for Performance N/A		N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			10.00	10.00	100%	20%	10%	22,128	22,128
	Total Complete			16.00	100%	100%	20%	44,256	44,256
Hide Revie	ewer Comments	Total P	roiect 3.a.i A	Vs Awarded	: 16 out of 16				

Total Project 3.a.i AVs Awarded: 16 out of 16

	Domain 1 Project Milestones - Project 3.a.i						
A۱	/ 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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	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					1

	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			
	•	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A			
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A			
3.a.i Model 1			•		·*					



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

The New York Presbyterian Hospital of Queens - Project 3.a.i

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016

Print 3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, Pass & Ongoing 9/30/2016 9/30/2016 In Process N/A SBIRT) implemented for all patients to identify unmet needs. 4. Use EHRs or other technical platforms to track all patients 3/31/2017 Pass & Ongoing 3/31/2017 In Process N/A engaged in this project. Pass & Ongoing 5. Co-locate primary care services at behavioral health sites. 3/31/2018 3/31/2018 In Process N/A 6. Develop collaborative evidence-based standards of care including medication management and care engagement 12/31/2016 12/31/2016 Pass & Ongoing N/A In Process process. 3.a.i Model 2 7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, 9/30/2016 9/30/2016 In Process Pass & Ongoing N/A SBIRT) implemented for all patients to identify unmet needs. 8. Use EHRs or other technical platforms to track all patients 3/31/2017 Pass & Ongoing 3/31/2017 In Process N/A engaged in this project. 9. Implement IMPACT Model at Primary Care Sites. Pass & Ongoing 3/31/2020 3/31/2020 In Process N/A



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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 3.a.i

	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
3.a.i Model 3	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	13. Measure outcomes as required in the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	 15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	In Process	Pass & Ongoing	N/A
	Total					0

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.i (all Milestones are P4R in DY1)



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AV Driving	Meas ure	Reviewer Status	AVs Awarded
	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	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



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	Total		10
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
		I	
_	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5



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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 3.b.i

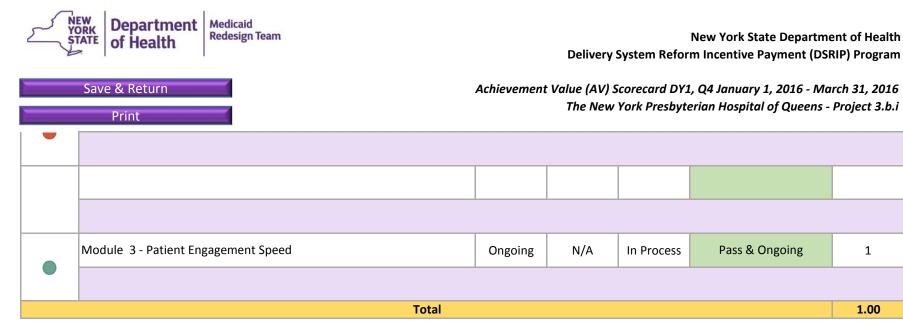
Project Snapshot			Payment Snapshot						
Project Domain	Clinical Improvement Projects (Domain 3)		Payment Available (DY1)	\$	165,410.88				
Project ID	3.b.i		DY1 Initial Payment	\$	99,246.53				
	Evidence based strategies for disease		DY1 Q2 Payment Earned	\$	33,082.18				
Project Title	Evidence-based strategies for disease management in high risk/affected populations.		DY1 Payment Not Earned to Date	\$	(0.00)				
Project fille			DY1 Funding Remaining	\$	33,082.18				
	(adult only)		Funding Available for Distribution DY1Q4	\$	33,082.18				

			3.b.i Score	sheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	16,541	16,541
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	16,541	16,541
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	20%	10%	16,541	16,541
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal		7.00	7.00	100%	20%	10%	16,541	16,541	
Total Complete			13.00	13.00	100%	100%	20%	33,082	33,082

Total Project 3.b.i AVs Awarded: 13 out of 13

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



	Domain 1 Project Prescribed	Milestones -	Project 3.b.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	 Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting. 	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Ensure that all PPS safety net providers are actively connected to 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	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
		-				
	3. 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	In Process	Pass & Ongoing	N/A
-		-				



Save & Return	Achievemen			l, Q4 January 1, 2016 - Ma	
Print		The New	York Presbyt	erian Hospital of Queens -	Project 3.b.i
4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
 7. Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management. 	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
10. Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A



Save & Return	Achievement			l, Q4 January 1, 2016 - Mai	-
Print		ine New	YORK Presbyte	erian Hospital of Queens -	Project 3.b.i
11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
14. Develop and implement protocols for home blood pressure monitoring with follow up support.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
18. Adopt strategies from the Million Hearts Campaign.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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	19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A	
	20. Engage a majority (at least 80%) of primary care providers in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A	
Total 0							

	Domain 3 Pay for Performance and Pay for Reporting - Project 3.b.i (all Milestones are P4R	in DY1)	
AV Driving	Measure	Reviewer Status	AVs Awarded
	Aspirin Use	Pass & Ongoing	0.5
	Discussion of Risks and Benefits of Aspirin Use	Pass & Ongoing	0.5
	Controlling High Blood Pressure	Pass & Ongoing	1
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1



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

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Print	The New York Pre	sbyterian Hospital of Queens -
Health Literacy (QHL13, 14, a	nd 16)	Pass & Ongoing
Medical Assistance with Smol	king and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing
Medical Assistance with Smol	king and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing
Medical Assistance with Smol	king and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing
Prevention Quality Indicator	# 13 (Angina without procedure) ±	Pass & Ongoing
Prevention Quality Indicator	¥7(HTN) ±	Pass & Ongoing

A a bia + 1/~ (4)/) C 1 2016 - Ma arch 31, 2016 Project 3.b.i

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Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 3.d.ii

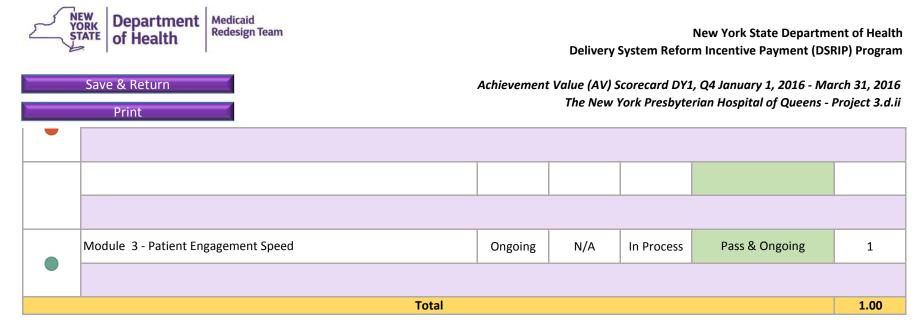
Project Snapshot			Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)		Payment Available (DY1)	\$ 178,696.13
Project ID	3.d.ii		DY1 Initial Payment	\$ 107,217.68
			DY1 Q2 Payment Earned	\$ 35,739.23
Project Title	Expansion of asthma home-based self-		DY1 Payment Not Earned to Date	\$ (0.00)
Project fille	management program		DY1 Funding Remaining	\$ 35,739.23
			Funding Available for Distribution DY1Q4	\$ 35,739.23

			3.d.ii Score	sheet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	17,870	17,870
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	17,870	17,870
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	10%	17,870	17,870
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 2 Subtotal		4.00	4.00	100%	20%	10%	17,870	17,870	
Total Complete			10.00	10.00	100%	100%	20%	35,739	35,739

Total Project 3.d.ii AVs Awarded: 10 out of 10

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	Domain 1 Project Milestones - Project 3.d.ii									
AV Driving	/ 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				



	Domain 1 Project Prescribed I	Milestones - I	Project 3.d.ii			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Expand asthma home-based self-management program to include home environmental trigger reduction, self-monitoring, medication use, and medical follow-up.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
	 Establish procedures to provide, coordinate, or link the client to resources for evidence-based trigger reduction interventions. Specifically, change the patient's indoor environment to reduce 	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
	3. Develop and implement evidence-based asthma management guidelines.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



	Save & Return Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31,					-
	Print		The New Y	ork Presbyte	rian Hospital of Queens - I	Project 3.d.ii
•	4. Implement training and asthma self-management education services, including basic facts about asthma, proper medication use, identification and avoidance of environmental exposures that worsen asthma, self-monitoring of asthma symptoms and asthma control, and using written asthma action plans.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
•	5. Ensure coordinated care for asthma patients includes social services and support.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	6. Implement periodic follow-up services, particularly after ED or hospital visit occurs, to provide patients with root cause analysis of what happened and how to avoid future events.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
•	7. Ensure communication, coordination, and continuity of care with Medicaid Managed Care plans, Health Home care managers, primary care providers, and specialty providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	Total					0.00

Domain 3 Pay for Performance and Pay for Reporting - Project 3.d.ii (all Milestones are P4R in DY1)								
AV Dri ving	Measure	Reviewer Status	AVs Awarded					



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	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1
•	Pediatric Quality Indicator #14 Pediatric Asthma ±	Pass & Ongoing	1
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1



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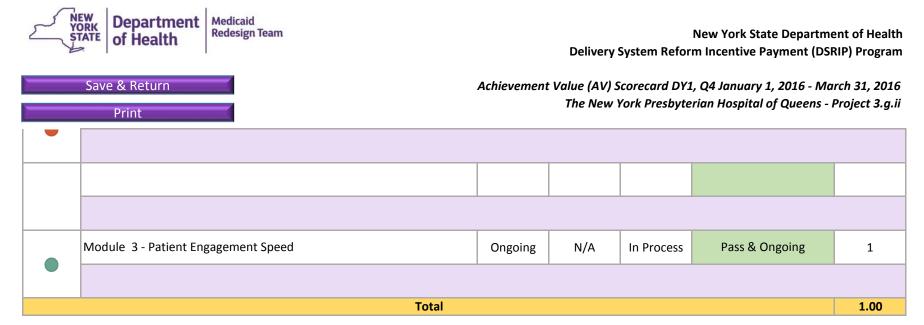
	Project Snapshot		Payment Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)	1	Payment Available (DY1)	\$ 157,051.77
Project ID	3.g.ii	1	DY1 Initial Payment	\$ 94,231.06
		1	DY1 Q2 Payment Earned	\$ 31,410.35
Project Title	Internation of Delliptive Constitute Number Llower		DY1 Payment Not Earned to Date	\$ (0.00)
Project fille	Integration of Palliative Care into Nursing Homes		DY1 Funding Remaining	\$ 31,410.35
			Funding Available for Distribution DY1Q4	\$ 31,410.35

			3.g.ii Score	sheet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%					
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	80%	10%	15,705	15,705	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		6.00	6.00	100%	80%	10%	15,705	15,705	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	1.00	1.00	100%	20%	10%	15,705	15,705	
Domain 5	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 2 Subtotal		1.00	1.00	100%	20%	10%	15,705	15,705	
	Total	Complete	7.00	7.00	100%	100%	20%	31,410	31,410	

Total Project 3.g.ii AVs Awarded: 7 out of 7

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



Domain 1 Project Prescribed Milestones - Project 3.g.ii						
AV Driving	Driving Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Integrate Palliative Care into practice model of participating Nursing Homes.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Contract or develop partnerships with community and provider resources, including Hospice, to bring the palliative care supports and services into the pursing home	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A



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5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total					

Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.ii (all Milestones are P4R in DY1)						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Proxy Palliative Care Measure	Pass & Ongoing	1			
	Total		1.00			



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

Achievement Value (AV) Scorecard DY1, Q4 January 1, 2016 - March 31, 2016 The New York Presbyterian Hospital of Queens - Project 4.c.ii

Project Snapshot			Payment Snapshot				
Project Domain	Domain 4: Population-wide Projects: New York's		Payment Available (DY1)	\$	119,921.67		
Project ID	4.c.ii		DY1 Initial Payment	\$	71,953.00		
			DY1 Q2 Payment Earned	\$	23,984.33		
Project Title	Increase early access to and retention in HIV care		DY1 Payment Not Earned to Date	\$	0.00		
Project fille	Increase early access to, and retention in, HIV care		DY1 Funding Remaining	\$	23,984.33		
			Funding Available for Distribution DY1Q4	\$	23,984.33		

4.c.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	80%		11,992	11,992
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		10%		
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			5.00	5.00	100%	80%	10%	11,992	11,992
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	10%	11,992	11,992
Domain 4	Domain 4 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal			11.00	100%	20%	10%	11,992	11,992
	Total	Complete	16.00	16.00	100%	100%	20%	23,984	23,984

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.ii (all Milestones are P4R in DY1)						
AV Driving	/ Driving Measure		AVs Awarded			
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non- Hispanics	Pass & Ongoing	1			



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



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Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total		11.00