

Achievement Value (AV) Scorecard Mount Sinai PPS, LLC

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

| | Functionality | |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Step | Description/Link | Image |
| 1. Print | All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports. | Print All |
| Access Detailed Project Reports and return to AV Scorecard Overview | The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview | Project Link (clirk on the purple flink below to access contol bull-bull-bull-bull-bull-bull-bull-bul |
| 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

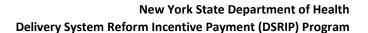
Achievement Value (AV) Scorecard Mount Sinai PPS, LLC

| | PPS Information | | | | | |
|------------|-------------------------------------------------------------|--|--|--|--|--|
| Quarter | DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) | | | | | |
| PPS | Mount Sinai PPS, LLC | | | | | |
| PPS Number | 34 | | | | | |

| Achievement Value (AV) Scorecard Summary | | | | | | | | | | |
|--------------------------------------------------------|---------------|-------------|------------------|--------------------|-----------------------------------------------------------------|---------------------------|--|--|--|--|
| Project Link (click on the purple link below to access | | AV [| Data | | Payme | ent Data | | | | |
| each individual project report) | AVs Available | AVs Awarded | AV Adjustment | Net AVs Awarded | DY3, Q2 Payment Available | DY3, Q2 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 | 20.00 | 0.00 | 20.00 | \$ 1,596,628 | \$ 1,596,628 | | | | |
| 2.b.iv | 22.00 | 22.00 | 0.00 | 22.00 | \$ 1,145,994 | \$ 1,145,994 | | | | |
| 2.b.viii | 22.00 | 22.00 | 0.00 | 22.00 | \$ 1,242,257 | \$ 1,242,257 | | | | |
| 2.c.i | 21.00 | 21.00 | 0.00 | 21.00 | \$ 1,047,143 | \$ 1,047,143 | | | | |
| 3.a.i | 16.00 | 11.00 | 0.00 | 11.00 | \$ 2,045,037 | \$ 1,405,963 | | | | |
| 3.a.iii | 16.00 | 10.00 | 0.00 | 10.00 | \$ 1,710,116 | \$ 1,061,697 | | | | |
| 3.b.i | 14.00 | 13.00 | 0.00 | 13.00 | \$ 1,549,293 | \$ 1,446,007 | | | | |
| 3.c.i | 12.00 | 12.00 | 0.00 | 12.00 | \$ 1,610,317 | \$ 1,610,317 | | | | |
| 4.b.ii | 22.00 | 22.00 | 0.00 | 22.00 | \$ 1,023,527 | \$ 1,023,527 | | | | |



| Print Summary Print All | | | | | A | | (AV) Scorecard t Sinai PPS, LLC |
|---------------------------|--------|--------|------|--------|----|------------|------------------------------------|
| 4.c.ii | 16.00 | 16.00 | 0.00 | 16.00 | \$ | 1,136,717 | \$ 1,136,717 |
| AV Adjustments (Column F) | | | | | | | |
| Total | 181.00 | 169.00 | 0.00 | 169.00 | \$ | 14,107,029 | \$ 12,716,250 |





Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



Print

| <u> </u> | Prin | | | | | |
|-----------------------|------|---------------------------------------------------------------------------------|-----------|-------|------------|-----------------|
| | | | | | | |
| | | Define target workforce state (in line | | | l | |
| | | with DSRIP program's goals) | N/A | N/A | In Process | Pass & Ongoing |
| | | | | 1 | 1 | |
| | | 2. Create a workforce transition roadmap for achieving defined target workforce | N/A | N/A | In Process | Pass & Ongoing |
| | | | | | | |
| Additional | | 3. Perform detailed gap analysis between current state assessment of workforce | N/A | N/A | In Process | Pass & Ongoing |
| 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 | 6/30/2016 | N/A | Completed | Pass & Complete |
| | | new hires, particularly focusing on full and partial placements | | | | |
| | | | | | | |
| | | 5. Develop training strategy | N/A | N/A | In Process | Pass & Ongoing |
| | | | | | | |
| | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing |



| | Prin | t | | | Mount | Sinai PPS, LLC - Domain 1 Orgo | ınizational AV |
|-------------------------|------|-----------------------------------------------------|-------|-----|------------|--------------------------------|----------------|
| | • | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| Additional Workforce | • | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |
| Strategy Topic Areas | • | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | N/A |
| | • | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | • | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |
| | | | Total | | | | 1 |

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



Print

| | PHIII | | | | | |
|-----------------------|-------|--------------------------------------------|---------|-----|------------|-----------------|
| | | | | | | |
| | | 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 | 6/30/2015 | N/A | Completed | Pass & Complete | |
| | | | | | | | |
| Governance Structure | | Establish a clinical governance structure, including clinical quality committees for each DSRIP project | 12/31/2015 | N/A | Completed | Pass & Complete | |



Print

| Updates | | | | | | | 1 |
|--------------------------------------|---|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|-----------|-----------------|-----|
| | | 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 | N/A | N/A | Completed | Pass & Complete | |
| Additional - | | | | | | | |
| Governance Milestones (non AV- | • | 7. 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 | N/A | Completed | Pass & Complete | N/A |
| driving) |) | | | | | | |
| | | 8. Finalize workforce communication and engagement plan | 6/30/2016 | N/A | Completed | Pass & Complete | |
| | | | | | | | |

Save & Return

Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs

9. Inclusion of CBOs in PPS Pass & Complete N/A 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 | |
| inancial | | | | | | | |
| 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 | |
| | | | | | | | |



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

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



| | Prin | t | | | Mount | : Sinai PPS, LLC - Domain 1 Orga | ınizational AVs |
|------------------------|------|------------------------------------------------------------|-------|-----|------------|----------------------------------|-----------------|
| | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| Additional | | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |
| Cultural Competency | | | ı | | | | N/A |
| /Health Literacy | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | , |
| Topic Areas | | | I | | | | |
| | | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | | ı | | | | |
| | | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | | Total | | | | 1 |

| | | Sect | tion 05 IT Syster | ns and Processe | S | | |
|---------|---------|-------------|-------------------|----------------------|-----------|-----------------|------------|
| Process | AV | Milestone | Required Due | Committed Due | Milestone | Reviewer Status | AV Awarded |
| Measure | Driving | Willestoffe | Date | Date | Status | Reviewei Status | AV Awarueu |



| | • | 1. Perform current state assessment of IT capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). | 9/30/2016 | N/A | Complete | Pass & Complete | |
|------------------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|------------|-----------------|-----|
| | • | Develop an IT Change Management Strategy. | 12/31/2016 | N/A | Complete | Pass & Complete | |
| IT Systems – | | | | | | | |
| and Processes | | 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network | N/A | N/A | In Process | Pass & Ongoing | N/A |
| | | | | | | | |
| | | 4. Develop a specific plan for engaging attributed members in Qualifying Entities | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | 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 | |



| | Print | | | | Mount | Sinai PPS, LLC - Domain 1 Orga | inizational AVs |
|-----------------------|-------|----------------------------|-------|-----|------------|--------------------------------|-----------------|
| 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 Perform | 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. | N/A | N/A | In Process | Pass & Ongoing | N/A |
| Performanc e Reporting | • | 2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting. | N/A | N/A | In Process | Pass & Ongoing | N/A |



| | Prin | t | | | Mount | : Sinai PPS, LLC - Domain 1 Orga | inizational AVs |
|----------------------------|------|------------------------------------------------------------|-------|-----|------------|----------------------------------|-----------------|
| | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |
| Additional Performanc | | | I | | | | N/A |
| e Reporting Topic Areas | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | |
| | | | I | | | | |
| | | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | | I | | | | |
| | | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | | Total | | | | 0 |

| | Section 07 Practitioner Engagement | | | | | | | |
|--------------------|------------------------------------|-------------------------------------------------------------|-----|-----|------------|----------------|--|--|
| Process Measure | Milestone Reviewer Status | | | | | | | |
| | | 1. Develop Practitioners communication and engagement plan. | N/A | N/A | In Process | Pass & Ongoing | | |



Print

| ractitioner ngagement | • | 2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda. | N/A | N/A | In Process | Pass & Ongoing | N/A |
|--------------------------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|------------|----------------|------|
| | | Major Risks to Implementation & Risk | | | | _ | |
| | | Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |
| dditional ractitioner | | | | | | | N/A |
| ngagement opic Areas | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | IN/A |
| | | | | | | | |
| | | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |

Save & Return

Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Mount Sinai PPS, LLC - Domain 1 Organizational AVs

Total 0

| | | Section | 08 Population | Health Managen | nent | | | |
|--------------------------|---------------|------------------------------------------------------------|----------------------|-----------------------|---------------------|-----------------|-----|--|
| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV | |
| | | Develop population health management roadmap. | N/A | N/A | In Process | Pass & Ongoing | | |
| opulation | | | | | | | | |
| 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 | | | | | | | | |
| lealth Topic Areas | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | | |
| | | | | | | | | |



Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment

| Print | | | . , | | Sinai PPS, LLC - Domain 1 Orga | |
|-------|--------------------|-------|-----|------------|--------------------------------|---|
| | IT Expectations | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | |
| | Progress Reporting | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | |
| | | Total | | | | 0 |

| | | | Section 09 Clinic | al Integration | | | |
|--------------------|---------------|------------------------------------------------------------|----------------------|-----------------------|---------------------|-----------------|------------|
| Process Measure | AV Driving | Milestone | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AV Awarded |
| | | 1. Perform a clinical integration 'needs assessment'. | 12/31/2016 | N/A | Completed | Pass & Complete | N/A |
| Clinical | | | | | | | IN/A |
| Integration | | 2. Develop a Clinical Integration strategy. | N/A | N/A | In Process | Pass & Ongoing | N/A |
| | | | | | | | 14/71 |
| | | Major Risks to Implementation & Risk Mitigation Strategies | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Major Dependencies on Organizational Workstreams | N/A | N/A | In Process | Pass & Ongoing | |
| | | | | | | | |
| | | Roles and Responsibilities | N/A | N/A | In Process | Pass & Ongoing | |



Save & Return

| | Print | | | | Mount | : Sinai PPS, LLC - Domain 1 Orga | ınizational AVs |
|----------------------------|-------|--------------------|-------|-----|------------|----------------------------------|-----------------|
| Additional Clinical | | | | | | | N/A |
| Integration Topic Areas | | Key Stakeholders | N/A | N/A | In Process | Pass & Ongoing | IN/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

Print

| AV Adjustment Scoresheet | | | | | | | | | |
|------------------------------------------------------|---------|----------|-----------|----------|------------|----------|---------|---------------|--|
| | AVs Per | Total | Total AVs | Total AV | Awarded | Adjusted | Net A | AVs Awarded | |
| Adjustment | Project | Projects | Available | Net | Percentage | | Net | Percentage AV | |
| | Project | Selected | Available | Awarded | AV | AVS | Awarded | Percentage Av | |
| Organizational Adjustments (applied to all projects) | 5.00 | 10.00 | 50.00 | 50.00 | 100% | 0.00 | 50.00 | 100% | |
| Project Adjustments (applied to one project only) | Various | 10.00 | 131.00 | 119.00 | 91% | 0.00 | 119.00 | 91% | |
| Total | | | 181.00 | 169.00 | 93% | 0.00 | 169.00 | 93% | |

| Hi | de Reviewer Comments | Organizational | Project Adjustments | | | | |
|----|----------------------------------------------------------------------------------|----------------|---------------------|--|--|--|--|
| | No AV Adjustments | | | | | | |
| | Please note that there are no AV adjustments for Mount Sinai PPS, LLC in DY2, Q1 | | | | | | |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - 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 | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,596,628 |
| DY3, Q2 Payment Earned | \$ 1,596,628 |

| | 2.a.i Scoresheet | | | | | | | | |
|----------|-----------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | 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% | 40% | 80% | | 1,277,303 |
| | Patient Engagement Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Domain 1 Subtotal | | 5.00 | 5.00 | 100% | 40% | 80% | 1,277,303 | 1,277,303 |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 319,326 | 319,326 |
| Domain 2 | Domain 2 Pay for Performance (P4P | N/A | N/A | N/A | N/A | 50% | 0% | - | - |
| | Domain 2 Subtotal | | | 15.00 | 100% | 60% | 20% | 319,326 | 319,326 |
| | Total Complet | | 20.00 | 20.00 | 100% | 100% | 100% | 1,596,628 | 1,596,628 |

Total Project 2.a.i AVs Awarded: 20 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 | In Process | Pass & Ongoing | 0.00 | | |
|-------|-----------------------------------------|---------|-----|------------|----------------|------|--|--|
| | Enter Reviewer Comment | | | | | | | |
| Total | | | | | | 0.00 | | |

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



| 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. | | | In Process | Pass & Ongoing | 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. | | | In Process | Pass & Ongoing | N/A | |
| Enter Reviewer Comment | | | | | | |
| 7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3. | | | In Process | Pass & Ongoing | 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 | In Process | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes. | | | In Process | Pass & Ongoing | 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 | | In Process | Pass & Ongoing | N/A | |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|----------------|------|--|
| | Enter Reviewer Comment | | | | | |
| Total | | | | | 0.00 | |

| | Domain 2 Pay for Performance and Pay for Reporting Project 2.a.i | | | | | |
|------------|------------------------------------------------------------------------------------------------------|-----------------|----------------|--|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | | |
| | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 | | | |
| | Enter Reviewer Comment | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 | | | |
| | Enter Reviewer Comment | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.3333333 | | | |
| | 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 | Pass & Ongoing | 0.25 |
|------------------------------------------------------------------------------|----------------|------|
| Enter Reviewer Comment | | |
| Children's Access to Primary Care- 7 to 11 years | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment | | |
| Children's Access to Primary Care- 12 to 19 years | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment | | |
| Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment | | |
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25) | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment | | |
| H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| 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 |



Print

| Enter Reviewer Comment | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---|
| PDI 90– Composite of all measures +/- | 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 | | |
| Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |



Save & Return

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 2.a.i

Print

| Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 | |
|--------------------------------------------|----------------|-------|--|
| Enter Reviewer Comment | | | |
| Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 | |
| Enter Reviewer Comment | | | |
| Total | | 15.00 | |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 2.b.iv

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,145,994 |
| DY3, Q2 Payment Earned | \$ 1,145,994 |

| | 2.b.iv Scoresheet | | | | | | | | | | | | | | |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|--|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) | | | | | | |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | | | | | | | | | |
| Domain 1 | Project Implementation Speed | Complete | 1.00 | 1.00 | 100% | | 80% | 916,795 | 916,795 | | | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | | | | | | | |
| | Domain 1 Subtotal | | 7.00 | 7.00 | 100% | 40% | 80% | 916,795 | 916,795 | | | | | | |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 229,199 | 229,199 | | | | | | |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - | | | | | | |
| Domain 2 Subtotal | | | 15.00 | 15.00 | 100% | 60% | 20% | 229,199 | 229,199 | | | | | | |
| | Total | Complete | 22.00 | 22.00 | 100% | 100% | 100% | 1,145,994 | 1,145,994 | | | | | | |

Total Project 2.b.iv AVs Awarded: 22 out of 22

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 | | | | mount smarrr s, LLC | | |
|-----------------------------------------|-----------|-----------|------------|---------------------|------|--|
| Enter Reviewer Comment | | | | | | |
| Module 2 - Project Implementation Speed | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | 1.00 | |
| Enter Reviewer Comment | | | | | | |
| Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 | |
| Enter Reviewer Comment | | | | | | |
| Total | | | | | | |

| | Domain 1 Project Prescribed M | ilestones Pr | oject 2.b.iv | | | | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------|---------------------|-----------------|----------------|--|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded | |
| | Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.50 | |
| | Enter Reviewer Comment | | | | | | |
| • | 3. Ensure required social services participate in the project. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.50 | |
| | Enter Reviewer Comment | | | | | | |



Print

| | 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 Reviewer Comment | | | | | | | |
| | 5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | Enter Reviewer Comment | | | | | | | |
| | 6. Ensure that a 30-day transition of care period is established. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/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 | | | | | | 1.00 | | |

| | Domain 2 Pay for Performance and Pay for Reporting Project 2.b.iv | | | | | |
|------------|-------------------------------------------------------------------|-----------------|----------------|--|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | | |
| | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 | | | |
| | Enter Reviewer Comment | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 | | | |
| | Enter Reviewer Comment | | | | | |



Print

| Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.3333333 |
|------------------------------------------------------------------------------------------------------|----------------|-----------|
| Enter Reviewer Comment | | |
| CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| Children's Access to Primary Care- 12 to 19 years | Pass & Ongoing | 0.25 |
| 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 | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment | | |
| Children's Access to Primary Care- 7 to 11 years | Pass & Ongoing | 0.25 |
| Enter Reviewer Comment | | |
| Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment | | |
| Helpful, Courteous, and Respectful Office Staff (Q24 and 25) | Pass & Ongoing | 0.5 |



| Print | Widding Sindi FF 5, EEC - F | roject zibiit |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------|
| Enter Reviewer Comment | | |
| H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| 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 | | |
| PDI 90– Composite of all measures +/- | 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 | | |



Save & Return Print

| | Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 | | |
|------------------------|---------------------------------------------|----------------|-------|--|--|
| | Enter Reviewer Comment | | | | |
| | Potentially Avoidable Readmissions | Pass & Ongoing | 1 | | |
| | Enter Reviewer Comment | | | | |
| | PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 | | |
| | Enter Reviewer Comment | | | | |
| | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 | | |
| | Enter Reviewer Comment | | | | |
| | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 | | |
| Enter Reviewer Comment | | | | | |
| | Total | | 15.00 | | |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 2.b.viii

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,242,257 |
| DY3, Q2 Payment Earned | \$ 1,242,257 |

| | 2.b.viii Scoresheet | | | | | | | | | | |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) | | |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | | | | | |
| Domain 1 | Project Implementation Speed | Complete | 1.00 | 1.00 | 100% | | % 80% | 993,806 | 993,806 | | |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | | | |
| | Domain 1 Subtotal | | 7.00 | 7.00 | 100% | 40% | 80% | 993,806 | 993,806 | | |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 248,451 | 248,451 | | |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - | | |
| | Domain 2 Subtotal | | | 15.00 | 100% | 60% | 20% | 248,451 | 248,451 | | |
| | Total | Complete | 22.00 | 22.00 | 100% | 100% | 100% | 1,242,257 | 1,242,257 | | |

Total Project 2.b.viii AVs Awarded: 22 out of 22

Hide Reviewer Comments

| | Domain 1 Project Milestones Project 2.b.viii | | | | | | |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|---------|-----|------------|----------------|-----|--|
| 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 | |



| | Print | | | | | -, | |
|------------------------|-----------------------------------------|-------------|-----|------------|----------------|-----------|--|
| | Enter Reviewer Comment | | | | | | |
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1.00 | |
| | Enter Revie | ewer Commen | nt | | | | |
| | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 | |
| Enter Reviewer Comment | | | | | | | |
| | Total | | | | | 2.00 | |

| | Domain 1 Project Prescribed Milestones Project 2.b.viii | | | | | | | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded | | |
| | 1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.20 | | |
| | Enter Reviewer Comment | | | | | | | |
| | 2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | Enter Reviewer Comment | | | | | | | |
| | 3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |



Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 2.b.viii

Print Enter Reviewer Comment Pass & Complete 4. Educate all staff on care pathways and INTERACT-like principles. 3/31/2017 3/31/2017 Completed N/A Enter Reviewer Comment 5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of 3/31/2017 | 3/31/2017 | Completed Pass & Complete N/A life care. Enter Reviewer Comment 6. Create coaching program to facilitate and support implementation. 3/31/2017 3/31/2017 Pass & Complete Completed N/A Enter Reviewer Comment 7. Educate patient and family/caretakers, to facilitate participation in Pass & Complete 3/31/2017 3/31/2017 Completed N/A planning of care. Enter Reviewer Comment 8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and Pass & Complete 9/30/2017 9/30/2017 Completed 0.20 medication management. Enter Reviewer Comment 9. Utilize telehealth/telemedicine to enhance hospital-home care Pass & Complete 9/30/2017 9/30/2017 Completed 0.20 collaborations. Enter Reviewer Comment



Save & Return Print

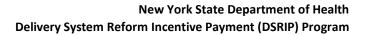
| | 10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.20 | | |
|-------|------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|-----------------|------|--|--|
| | Enter Reviewer Comment | | | | | | | |
| | 11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions. | 9/30/2017 | 9/30/2017 | Completed | Pass & Complete | 0.20 | | |
| | Enter Reviewer Comment | | | | | | | |
| | 12. Use EHRs and other technical platforms to track all patients engaged in the project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | Enter Reviewer Comment | | | | | | | |
| Total | | | | | | 1.00 | | |

| | Domain 2 Pay for Performance and Pay for Reporting Project 2.b.viii | | | | | | |
|------------|---------------------------------------------------------------------|-----------------|----------------|--|--|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | | | |
| | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 | | | | |
| | Enter Reviewer Comment | | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 | | | | |
| | Enter Reviewer Comment | | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.3333333 | | | | |
| | Enter Reviewer Comment | | | | | | |



Print

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





| Print | Mount Sinai PPS, LLC - Pr | oject 2.b.viii |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------|
| Enter Reviewer Comment | | |
| 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 | | |
| PDI 90– Composite of all measures +/- | 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 | | |
| Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |



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

Save & Return

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) Mount Sinai PPS, LLC - Project 2.b.viii

Print

| • | Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
|---|--------------------------------------------|----------------|-------|
| | Enter Reviewer Comment | | |
| | PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| • | Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 |
| | Enter Reviewer Comment | | |
| | Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 |
| | Enter Reviewer Comment | | |
| | Total | | 15.00 |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 2.c.i

| | Project Snapshot | | | | | | |
|-----------------------|-------------------------------------------------|--|--|--|--|--|--|
| Project Domain | System Transformation Projects (Domain 2) | | | | | | |
| Project ID | 2.c.i | | | | | | |
| | To develop a community based health navigation | | | | | | |
| Project Title | service to assist patients to access healthcare | | | | | | |
| | services efficiently | | | | | | |

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,047,143 |
| DY3, Q2 Payment Earned | \$ 1,047,143 |

| | 2.c.i Scoresheet | | | | | | | | | | | |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) | | | |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | | | | | | |
| Domain 1 | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | 80% | 837,714 | 837,714 | | | |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | | | | |
| | Domain 1 Subtotal | | 6.00 | 6.00 | 100% | 40% | 80% | 837,714 | 837,714 | | | |
| Domain 2 | Domain 2 Pay for Reporting (P4R) | Complete | 15.00 | 15.00 | 100% | 10% | 20% | 209,429 | 209,429 | | | |
| Domain 2 | Domain 2 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 50% | 0% | - | - | | | |
| Domain 2 Subtotal | | | 15.00 | 15.00 | 100% | 60% | 20% | 209,429 | 209,429 | | | |
| | Total | Complete | 21.00 | 21.00 | 100% | 100% | 100% | 1,047,143 | 1,047,143 | | | |

Total Project 2.c.i AVs Awarded: 21 out of 21

Hide Reviewer Comments

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



| | Print | | | | , | | | |
|---|-----------------------------------------|---------|-----|------------|-----------------|------|--|--|
| | Enter Reviewer Comment | | | | | | | |
| | Module 2 - Project Implementation Speed | Ongoing | N/A | Completed | Pass & Complete | 0.00 | | |
| | Enter Reviewer Comment | | | | | | | |
| • | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 | | |
| | Enter Reviewer Comment | | | | | | | |
| | Total | | | | | | | |

| | Domain 1 Project Prescribed Milestones Project 2.c.i | | | | | | | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------|---------------------|-----------------|----------------|--|--|
| AV Driving | Project Requirement and Metric/Deliverable | Required Due Date | Committed Due Date | Milestone Status | Reviewer Status | AVs Awarded | | |
| | 1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently. | | | In Process | Pass & Ongoing | N/A | | |
| | Enter Revie | wer Commen | nt | | | | | |
| | 2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | Enter Reviewer Comment | | | | | | | |
| | 3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | Enter Reviewer Comment | | | | | | | |
| | 4. Resource appropriately for the community navigators, evaluating placement and service type. | | | In Process | Pass & Ongoing | N/A | | |



| Print | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------|------------|-----------------|-----|--|
| Enter Reviewer Comment | | | | | | |
| 5. Provide community navigators with access to non-clinical resources, such as transportation and housing services. | | | In Process | Pass & Ongoing | N/A | |
| Enter Revie | ewer Commen | nt | | | | |
| 6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 7. Market the availability of community-based navigation services. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 8. 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 Performance and Pay for Reporting | | | | | | | |
|------------|----------------------------------------------------------------|-----------------|----------------|--|--|--|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 20 to 44 years | Pass & Ongoing | 0.3333333 | | | | | |
| | Enter Reviewer Comment | | | | | | | |
| | Adult Access to Preventive or Ambulatory Care - 45 to 64 years | Pass & Ongoing | 0.3333333 | | | | | |



Drint

| <i>E</i> | Print | | |
|----------|------------------------------------------------------------------------------------------------------|----------------|-----------|
| | Enter Reviewer Comment | | |
| | Adult Access to Preventive or Ambulatory Care - 65 and older | Pass & Ongoing | 0.3333333 |
| | Enter Reviewer Comment | | |
| | CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Children's Access to Primary Care- 12 to 19 years | Pass & Ongoing | 0.25 |
| | 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 | Pass & Ongoing | 0.25 |
| | Enter Reviewer Comment | | |
| | Children's Access to Primary Care- 7 to 11 years | Pass & Ongoing | 0.25 |
| | Enter Reviewer Comment | | |
| | Getting Timely Appointments, Care and information (Q6, 8, 10, and 12) | Pass & Ongoing | 0.5 |
| | Enter Reviewer Comment | | |
| | | | |



Print

| Helpful, Courteous, and Respectful Office Staff (Q24 and 25) | Pass & Ongoing | 0.5 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----|
| Enter Reviewer Comment | | |
| H-CAHPS – Care Transition Metrics | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| 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 | | |
| PDI 90– Composite of all measures +/- | 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 |

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

Save & Return

Drint

| Print | | |
|---------------------------------------------|----------------|-------|
| Enter Reviewer Comment | | |
| Potentially Avoidable Emergency Room Visits | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| Potentially Avoidable Readmissions | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| PQI 90 – Composite of all measures +/- | Pass & Ongoing | 1 |
| Enter Reviewer Comment | | |
| Primary Care - Length of Relationship - Q3 | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment | | |
| Primary Care - Usual Source of Care - Q2 | Pass & Ongoing | 0.5 |
| Enter Reviewer Comment | | |
| Total | | 15.00 |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.a.i

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 2,045,037 |
| DY3, Q2 Payment Earned | \$ 1,405,963 |

| | 3.a.i Scoresheet | | | | | | | | |
|----------|------------------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) |
| | omain 1 Organizational Complete 5.00 5.00 100% | | | | | | | | |
| Domain 1 | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | 40% | 40% | 818,015 | 818,015 |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | |
| | Domain 1 Subtotal | | 6.00 | 6.00 | 100% | 40% | 40% | 818,015 | 818,015 |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 2.00 | 2.00 | 100% | 10% | 10% | 204,504 | 204,504 |
| Domain 5 | Domain 3 Pay for Performance | Complete | 8.00 | 3.00 | 38% | 50% | 50% | 1,022,519 | 383,444 |
| | Domain 3 Subtotal | | | | 50% | 60% | 60% | 1,227,022 | 587,948 |
| | Total | Complete | 16.00 | 11.00 | 69% | 100% | 100% | 2,045,037 | 1,405,963 |

Total Project 3.a.i AVs Awarded: 11 out of 16

Hide Reviewer Comments

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

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

Save & Return

| Print | | | | Mount Sinai PPS, LLC - | Project 3.a.i | | | |
|-----------------------------------------|---------|-----|------------|------------------------|---------------|--|--|--|
| Enter Reviewer Comment | | | | | | | | |
| Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 | | | |
| Enter Reviewer Comment | | | | | | | | |
| Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 | | | |
| Enter Reviewer Comment | | | | | | | | |
| 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. | | | In Process | Pass & Ongoing | N/A | | | | |
| | | Enter Reviewer Comment | | | | | | | | | |
| | | 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 | | | | | Mount Sinai PPS, LLC - | 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. | | | In Process | Pass & Ongoing | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | 4. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | 5. Co-locate primary care services at behavioral health sites. | | | In Process | Pass & Ongoing | N/A | | |
| | | Enter Reviewer Comment | | | | | | | |
| | | 6. Develop collaborative evidence-based standards of care including medication management and care engagement process. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | Enter Reviewer Comment | | | | | | | |
| 3.a.i Model 2 | | 7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs. | | | In Process | Pass & Ongoing | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | 8. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | 9. Implement IMPACT Model at Primary Care Sites. | | | In Process | Pass & Ongoing | N/A | | |



| | Print | | | | | Widding Sindi FT 5, EEC - | | | |
|---------------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|------------|---------------------------|-----|--|--|
| | | En | ter Reviewer | Comment | | | | | |
| | | 10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | 11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| 3.a.i Model 3 | | En | ter Reviewer | Comment | | | | | |
| | • | 12. Designate a Psychiatrist meeting requirements of the IMPACT Model. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | Enter Reviewer Comment | | | | | | | |
| | | 13. Measure outcomes as required in the IMPACT Model. | | | In Process | Pass & Ongoing | N/A | | |
| | | Enter Reviewer Comment | | | | | | | |
| | | 14. Provide "stepped care" as required by the IMPACT Model. | | | In Process | Pass & Ongoing | N/A | | |
| | | Enter Reviewer Comment | | | | | | | |
| | | 15. Use EHRs or other technical platforms to track all patients engaged in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | | |
| | | En | ter Reviewer | Comment | | | | | |
| | | Total | | | | | 0 | | |



Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) Mount Sinai PPS, LLC - Project 3.a.i

Print

| AV Driving | Measure | Reviewer Status | AVs Awarded |
|------------|------------------------------------------------------------------------------------------------------------|-----------------|----------------|
| | Adherence to Antipsychotic Medications for People with Schizophrenia | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| | Antidepressant Medication Management - Effective Acute Phase Treatment | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| | Antidepressant Medication Management - Effective Continuation Phase Treatment | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia | Fail | 0 |
| | P4P Measure DY3Q2 | | |
| | Diabetes Monitoring for People with Diabetes and Schizophrenia | Pass & Ongoing | 1 |
| | P4P Measure DY3Q2 | | |
| | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Pass & Ongoing | 1 |
| | P4P Measure DY3Q2 | | |
| | Follow-up after hospitalization for Mental Illness - within 30 days | Fail | 0 |
| | P4P Measure DY3Q2 | | |



Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) Mount Sinai PPS, LLC - Project 3.a.i

Print Follow-up after hospitalization for Mental Illness - within 7 days Fail 0 P4P Measure DY3Q2 Follow-up care for Children Prescribed ADHD Medications - Continuation Phase Pass & Ongoing 0.5 P4R Measure DY3Q2 Follow-up care for Children Prescribed ADHD Medications - Initiation Phase Pass & Ongoing 0.5 P4R Measure DY3Q2 Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) Fail 0 P4P Measure DY3Q2 Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days) Fail 0 P4P Measure DY3Q2 Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ± Pass & Ongoing 1 P4P Measure DY3Q2 Screening for Clinical Depression and follow-up Pass & Ongoing 1 P4R Measure DY3Q2 Total 5.00



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.a.iii

| | Project Snapshot | | | | |
|-----------------------------------------------------------|---------------------------------------------------|--|--|--|--|
| Project Domain Clinical Improvement Projects (Domain 3) | | | | | |
| Project ID | oject ID 3.a.iii | | | | |
| | Implementation of Evidence-Based Medication | | | | |
| Project Title | Adherence Program (MAP) in Community Based | | | | |
| | Sites for Behavioral Health Medication Compliance | | | | |

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,710,116 |
| DY3, Q2 Payment Earned | \$ 1,061,697 |

| 3.a.iii Scoresheet | | | | | | | | | | | | | |
|--------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|--|--|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | 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% | 40% | 40% | 684,046 | 570,039 | | | | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | | | | | |
| | Domain 1 Subtotal | | 6.00 | 5.00 | 83% | 40% | 40% | 684,046 | 570,039 | | | | |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | (omplete | 2.00 | 2.00 | 100% | 10% | 10% | 171,012 | 171,012 | | | | |
| Domain 5 | Domain 3 Pay for Performance (P4P) | | 8.00 | 3.00 | 38% | 50% | 50% | 855,058 | 320,647 | | | | |
| | Domain 3 Subtotal | | 10.00 | 5.00 | 50% | 60% | 60% | 1,026,069 | 491,658 | | | | |
| | Total | Complete | 16.00 | 10.00 | 63% | 100% | 100% | 1,710,116 | 1,061,697 | | | | |

Total Project 3.a.iii AVs Awarded: 10 out of 16

Hide Reviewer Comments

| Domain 1 Project Milestones Project 3.a.iii | | | | | | |
|---------------------------------------------|--------------------------------------------------------------------|---------|--------------------------------------------------|------------|-----------------|----------------|
| AV Driving | Driving Project Requirement and Metric/Deliverable | | Committed Milestone Due Date Status Reviewer Sta | | 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 | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 | | |
| | Enter Reviewer Comment | | | | | | | |
| | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Fail | 0 | | |
| | Enter Reviewer Comment | | | | | | | |
| | Total | | | | | | | |

| | Domain 1 Project Prescribed Milestones Project 3.a.iii | | | | | | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------|------------|-----------------|----------------|--|
| AV Driving | AV Driving Project Requirement and Metric/Deliverable R | | Committed Mileston Due Date Status | | Reviewer Status | AVs Awarded | |
| | 1. Develop a medication adherence program to improve behavioral health medication adherence through culturally-competent health literacy initiatives including methods based on the Fund for Public Health NY's Medication Adherence Project (MAP). | | | In Process | Pass & Ongoing | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 2. Form care teams including practitioners, care managers including Health Home care managers, social workers and pharmacists who are engaged with the behavioral health population. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 3. 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 | | | | | | |



Print

| | 4. Coordinate with Medicaid Managed Care Plans to improve medication adherence. | | | In Process | Pass & Ongoing | N/A |
|-------|---------------------------------------------------------------------------------|--|--|------------|----------------|------|
| | Enter Reviewer Comment | | | | | |
| Total | | | | | | 0.00 |

| Domain 3 Pay for Performance and Pay for Reporting | | | | | |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------------|----------------|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | |
| | Adherence to Antipsychotic Medications for People with Schizophrenia | Fail | 0 | | |
| | P4P Measure DY3Q2 | | | | |
| | Antidepressant Medication Management - Effective Acute Phase Treatment | Fail | 0 | | |
| | P4P Measure DY3Q2 | | | | |
| | Antidepressant Medication Management - Effective Continuation Phase Treatment | Fail | 0 | | |
| | P4P Measure DY3Q2 | | | | |
| | Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia | Fail | 0 | | |
| | P4P Measure DY3Q2 | | | | |
| | Diabetes Monitoring for People with Diabetes and Schizophrenia | Pass & Ongoing | 1 | | |
| | P4P Measure DY3Q2 | | | | |
| | Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication | Pass & Ongoing | 1 | | |



Drint

| Print | | |
|----------------------------------------------------------------------------------------------------|----------------|-----|
| P4P Measure DY3Q2 | | |
| Follow-up after hospitalization for Mental Illness - within 30 days | Fail | 0 |
| P4P Measure DY3Q2 | | |
| Follow-up after hospitalization for Mental Illness - within 7 days | Fail | 0 |
| P4P Measure DY3Q2 | | |
| Follow-up care for Children Prescribed ADHD Medications - Continuation Phase | Pass & Ongoing | 0.5 |
| P4R Measure DY3Q2 | | |
| Follow-up care for Children Prescribed ADHD Medications - Initiation Phase | Pass & Ongoing | 0.5 |
| P4R Measure DY3Q2 | | |
| Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days) | Fail | 0 |
| P4P Measure DY3Q2 | | |
| Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days) | Fail | 0 |
| P4P Measure DY3Q2 | | |
| Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ± | Pass & Ongoing | 1 |
| P4P Measure DY3Q2 | | |



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

| Save | & | Return | ₹ |
|------|---|--------|---|
| | | | |

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.a.iii

| Print | |
|--------------------------------|--------------------|
| Screening for Clinical Depress | sion and follow-up |

Pass & Ongoing

1

P4R Measure DY3Q2

Total 5.00



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.b.i

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,549,293 |
| DY3, Q2 Payment Earned | \$ 1,446,007 |

| | 3.b.i Scoresheet | | | | | | | | | |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | 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% | 40% | 40% | 619,717 | 516,431 | |
| | Patient Engagement Speed | Complete | 1.00 | 0.00 | 0% | | | | | |
| | Domain 1 Subtotal | | 6.00 | 5.00 | 83% | 40% | 40% | 619,717 | 516,431 | |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 8.00 | 8.00 | 100% | 10% | 60% | 929,576 | 929,576 | |
| Domain 5 | Domain 3 Pay for Performance (P4P) | | 0.00 | 0.00 | N/A | 50% | 0% | - | - | |
| | Domain 3 Subtotal | | 8.00 | 8.00 | 100% | 60% | 60% | 929,576 | 929,576 | |
| | Total | Complete | 14.00 | 13.00 | 93% | 100% | 100% | 1,549,293 | 1,446,007 | |

Total Project 3.b.i AVs Awarded: 13 out of 14

Hide Reviewer Comments

| I | 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 |



| Print | | | | Wount Smal PPS, LLC - | Project 3.b.i | |
|-----------------------------------------|---------|-----|------------|-----------------------|---------------|--|
| Enter Reviewer Comment | | | | | | |
| Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 | |
| Enter Reviewer Comment | | | | | | |
| Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Fail | 0 | |
| Enter Reviewer Comment | | | | | | |
| Total | | | | | 0.00 | |

| | 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 | |
| | 1. Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 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 end of DY 3. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 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. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Reviewer Comment | | | | | | |



| | Print | | | | Mount Sinai PPS, LLC - | 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 | Completed | Pass & Complete | N/A | |
| | Enter Revie | wer Commer | nt | | | | |
| | 5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange). | | | In Process | Pass & Ongoing | N/A | |
| | Enter Revie | ewer Commer | rt | | | | |
| | 6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| | Enter Revie | ewer Commer | rt | | | | |
| • | 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 | Completed | Pass & Complete | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Revie | ewer Commer | nt | | | | |
| | 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 | Completed | Pass & Complete | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 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. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Revie | ewer Commer | nt | | | | |



Print

| Time | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------|------------|-----------------|-----|--|
| 11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| Enter Revie | ewer Commen | rt | | | | |
| 12. Document patient driven self-management goals in the medical record and review with patients at each visit. | | | In Process | Pass & Ongoing | N/A | |
| Enter Revie | ewer Commen | nt | | | | |
| 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. | | | In Process | Pass & Ongoing | N/A | |
| Enter Revie | wer Commen | rt | | | | |
| 14. Develop and implement protocols for home blood pressure monitoring with follow up support. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 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 | Completed | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 16. Facilitate referrals to NYS Smoker's Quitline. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| Enter Reviewer Comment | | | | | | |
| 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk | | | In Process | Pass & Ongoing | N/A | |
| Enter Reviewer Comment | | | | | | |
| 18. Adopt strategies from the Million Hearts Campaign. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |



| 1 | Print | | | | | | |
|---|---------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|------------|-----------------|------|--|
| | Enter Reviewer Comment | | | | | | |
| | 19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project. | | | In Process | Pass & Ongoing | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | 20. Engage a majority (at least 80%) of primary care providers in this project. | 3/31/2017 | 3/31/2017 | Completed | Pass & Complete | N/A | |
| | Enter Reviewer Comment | | | | | | |
| | Total | | | | | 0.00 | |

| | Domain 3 Pay for Performance and Pay for Reporting | | | | |
|------------|----------------------------------------------------|-----------------|----------------|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | |
| | Aspirin Use | Pass & Ongoing | 0.5 | | |
| | P4R Measure DY3Q2 | | | | |
| | Discussion of Risks and Benefits of Aspirin Use | Pass & Ongoing | 0.5 | | |
| | P4R Measure DY3Q2 | | | | |
| | Controlling High Blood Pressure | Pass & Ongoing | 1 | | |
| | P4R Measure DY3Q2 | | | | |
| | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 | | |
| | P4R Measure DY3Q2 | | | | |



| Print | Mount Sinai PPS, LLC - | Project 3.b.i |
|--------------------------------------------------------------------------------------------|------------------------|---------------|
| Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 |
| P4R Measure DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.3333333 |
| P4R Measure DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 |
| P4R Measure DY3Q2 | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 |
| P4R Measure DY3Q2 | | |
| Statin Therapy for Patients with Cardiovascular Disease - Received Statin Therapy | Pass & Ongoing | 0.5 |
| P4R Measure DY3Q2 | | |
| Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence 80% | Pass & Ongoing | 0.5 |
| P4R Measure DY3Q2 | | |
| Prevention Quality Indicator # 8 (Heart Failure) ± | Pass & Ongoing | 1 |
| P4R Measure in DY3Q2 | | |
| Prevention Quality Indicator # 7 (HTN) ± | Pass & Ongoing | 1 |



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

8.00

Save & Return

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.b.i

Print

P4R Measure DY3Q2

Total



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 3.c.i

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,610,317 |
| DY3, Q2 Payment Earned | \$ 1,610,317 |

| | | | 3.c.i Scores | heet | | | | | |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | | | 644,127 | |
| Domain 1 | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | 40% | 40% | | 644,127 |
| | Patient Engagement Speed | Complete | 1.00 | 1.00 | 100% | | | | |
| | Domain 1 Subtotal | | 6.00 | 6.00 | 100% | 40% | 40% | 644,127 | 644,127 |
| Domain 3 | Domain 3 Pay for Reporting (P4R) | Complete | 6.00 | 6.00 | 100% | 10% | 60% | 966,190 | 966,190 |
| Domain 5 | Domain 3 Pay for Performance (P4P) | Complete | 0.00 | 0.00 | N/A | 50% | 0% | - | - |
| Domain 2 Subtotal | | | 6.00 | 6.00 | 100% | 60% | 60% | 966,190 | 966,190 |
| | Total | Complete | 12.00 | 12.00 | 100% | 100% | 100% | 1,610,317 | 1,610,317 |

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

Hide Reviewer Comments

| I | Domain 1 Project Milestones Project 3.c.i | | | | | | | |
|---|-------------------------------------------|--------------------------------------------------------------------|---------|-----------------------|---------------------|-----------------|----------------|--|
| | AV Driving | ing 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 | |



| 1 | Print | | | | | | |
|---|-----------------------------------------|-------------|-----|------------|----------------|------|--|
| | Enter Reviewer Comment | | | | | | |
| | Module 2 - Project Implementation Speed | Ongoing | N/A | In Process | Pass & Ongoing | 0.00 | |
| | Enter Revie | ewer Commen | t | | | | |
| | Module 3 - Patient Engagement Speed | Ongoing | N/A | In Process | Pass & Ongoing | 1 | |
| | Enter Reviewer Comment | | | | | | |
| | Total | | | | | | |

| | Domain 1 Project Prescribed Milestones P | roject 3.c.i | | | | | | | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|-----------------|-----|--|--|--|--|
| AV Driving | Project Requirement and Metric/Deliverable Project Requirement and Metric/Deliverable Committed Milestone Due Date Status | | Reviewer Status | AVs Awarded | | | | | |
| | 1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings. | | | Pass & Ongoing | 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 | | | Mount Sinai PPS, LLC - | Project 3.c.i | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|------------------------|---------------|--|--|--|--|
| Enter Reviewer Comment | | | | | | | | |
| 5. Ensure coordination with the Medicaid Managed Care organizations serving the target population. | | | Pass & Ongoing | N/A | | | | |
| Enter Reviewer Commer | nt | | | | | | | |
| 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. | | | Pass & Ongoing | N/A | | | | |
| Enter Reviewer Comment | | | | | | | | |
| Total | | | | 0.00 | | | | |

| | Domain 3 Pay for Performance and Pay for Reporting | | | | | | |
|------------|-----------------------------------------------------------------------------------------------------------------|-----------------|----------------|--|--|--|--|
| AV Driving | Measure | Reviewer Status | AVs Awarded | | | | |
| | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ± | Pass & Ongoing | 1 | | | | |
| | P4R Measure in DY3Q2 | | | | | | |
| | Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor) | Pass & Ongoing | 1 | | | | |
| | P4R Measure in DY3Q2 | | | | | | |
| | Flu Shots for Adults Ages 18 – 64 | Pass & Ongoing | 1 | | | | |
| | P4R Measure in DY3Q2 | | | | | | |



| Print | Mount Sinai PPS, LLC - | Project 3.c.i | | | |
|--------------------------------------------------------------------------------------------|------------------------|---------------|--|--|--|
| Health Literacy (QHL13, 14, and 16) | Pass & Ongoing | 1 | | | |
| P4R Measure in DY3Q2 | | | | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit | Pass & Ongoing | 0.3333333 | | | |
| P4R Measure in DY3Q2 | | | | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication | Pass & Ongoing | 0.3333333 | | | |
| P4R Measure in DY3Q2 | | | | | |
| Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies | Pass & Ongoing | 0.3333333 | | | |
| P4R Measure in DY3Q2 | | | | | |
| Prevention Quality Indicator # 1 (DM Short term complication) ± | Pass & Ongoing | 1 | | | |
| P4R Measure in DY3Q2 | | | | | |
| Total | | 6.00 | | | |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 4.b.ii

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

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,023,527 |
| DY3, Q2 Payment Earned | \$ 1,023,527 |

| | | | 4.b.ii Scores | heet | | | | | |
|----------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | | 40% | 409,411 | |
| Domain 1 | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | 40% | | | 409,411 |
| | Patient Engagement Speed | N/A | 0.00 | 0.00 | 0% | | | | |
| | Domain 1 Subtotal | | 5.00 | 5.00 | 100% | 40% | 40% | 409,411 | 409,411 |
| Domain 4 | Domain 4 Pay for Reporting (P4R) | Complete | 17.00 | 17.00 | 100% | 60% | 60% | 614,116 | 614,116 |
| Domain 4 | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - |
| | Domain 4 Subtotal | | | 17.00 | 100% | 60% | 60% | 614,116 | 614,116 |
| | Total | Complete | 22.00 | 22.00 | 100% | 100% | 100% | 1,023,527 | 1,023,527 |

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

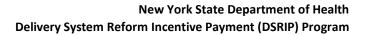
Hide Reviewer Comments

| | 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

| Print | | |
|----------------------------------------------------------------------------------------------------------------------------------|----------------|---|
| 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 DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - 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 50-75 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

| 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 | | 17.00 |



Print

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)

Mount Sinai PPS, LLC - Project 4.c.ii

| Project Snapshot | | | | |
|-----------------------------------------------------------------|------------------------------------------------------|--|--|--|
| Project Domain Domain 4: Population-wide Projects: New York's | | | | |
| Project ID | 4.c.ii | | | |
| Project Title | Increase early access to, and retention in, HIV care | | | |

| Payment Snapshot | |
|---------------------------|-----------------|
| DY3, Q2 Payment Available | \$ 1,136,717 |
| DY3, Q2 Payment Earned | \$ 1,136,717 |

| | 4.c.ii Scoresheet | | | | | | | | | |
|-------------------|------------------------------------|---------------|------------------|--------------------|------------------|------------------------------|----------------------------------|------------------------------|-------------------------------|--|
| Domain | Component | Review Status | AVs Available | Net AVs Awarded | Percentage AV | Domain Funding % (DY3) | Domain Funding % (DY3, Q2) | Payment Available (\$) | Net Payment Earned (\$) | |
| | Domain 1 Organizational | Complete | 5.00 | 5.00 | 100% | 40% | 40% 40% | 0% 454,687 | | |
| Domain 1 | Project Implementation Speed | N/A | 0.00 | 0.00 | 0% | | | | 454,687 | |
| | Patient Engagement Speed | N/A | 0.00 | 0.00 | 0% | | | | | |
| Domain 1 Subtotal | | | 5.00 | 5.00 | 100% | 40% | 40% | 454,687 | 454,687 | |
| Domain 4 | Domain 4 Pay for Reporting (P4R) | Complete | 11.00 | 11.00 | 100% | 60% | 60% | 682,030 | 682,030 | |
| Domain 4 | Domain 4 Pay for Performance (P4P) | N/A | N/A | N/A | N/A | 0% | 0% | - | - | |
| Domain 4 Subtotal | | | 11.00 | 11.00 | 100% | 60% | 60% | 682,030 | 682,030 | |
| Total Complete | | 16.00 | 16.00 | 100% | 100% | 100% | 1,136,717 | 1,136,717 | | |

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

Hide Reviewer Comments

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



| | Print | Mount Sinai PPS, LLC - I | Project 4.c.ii |
|---|-----------------------------------------------------------------------------------------------------------|--------------------------|----------------|
| | Enter Reviewer Comment | | |
| | Newly diagnosed HIV case rate per 100,000 | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Percentage of adults with health insurance - Aged 18- 64 years | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Percentage of premature death (before age 65 years) | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| | Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |
| • | Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics | Pass & Ongoing | 1 |
| | Enter Reviewer Comment | | |



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

Save & Return

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