

Achievement Value (AV) Scorecard Westchester Medical Center

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

	Functionality	
Step	Description/Link	Image
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All
2. Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Link (click on the purple fink below to access each below/dust project report) Domain I: Organizational [All Project3] AV Adjustments (Column 1) 2.31 2.41 2.41 2.41 2.47
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



Print Summary

Print All

Achievement Value (AV) Scorecard Westchester Medical Center

PPS Information						
Quarter DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter)						
PPS	Westchester Medical Center					
PPS Number	21					

Achievement Value (AV) Scorecard Summary										
Project Link (click on the purple link below to access		AV [Data		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	\$ 2,398,271	\$ 2,398,271				
2.a.iii	21.00	21.00	0.00	21.00	\$ 1,970,008	\$ 1,970,008				
2.a.iv	21.00	21.00	0.00	21.00	\$ 2,312,618	\$ 2,312,618				
2.b.iv	21.00	21.00	0.00	21.00	\$ 1,841,529	\$ 1,841,529				
2.d.i	10.00	9.00	0.00	9.00	\$ 2,131,977	\$ 1,847,714				
3.a.i	15.00	10.00	0.00	10.00	\$ 3,302,281	\$ 2,122,895				
3.a.ii	15.00	10.00	0.00	10.00	\$ 3,169,143	\$ 2,037,307				
3.c.i	12.00	12.00	0.00	12.00	\$ 2,569,576	\$ 2,569,576				
3.d.iii	14.00	13.50	0.00	13.50	\$ 2,655,228	\$ 2,323,325				



Print Summary Print All					A			(AV) Scorecard Medical Center
4.b.i	22.00	22.00	0.00	22.00	\$	1,970,008	\$	1,970,008
4.b.ii	22.00	22.00	0.00	22.00	\$	1,456,093	\$	1,456,093
AV Adjustments (Column F)								
Total	193.00	181.50	0.00	181.50	Ś	25.776.734	Ś	22.849.343





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Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

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



Print

	Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing
	Create a workforce transition roadmap for achieving defined target workforce	12/31/2016	N/A	Completed	Pass & Complete
Additional	3. Perform detailed gap analysis between current state assessment of workforce	3/31/2017	N/A	Completed	Pass & Complete
Workforce Strategy	and projected future state		·	·	
Budget Updates -					
non AV-	4. Produce a compensation and benefit analysis, covering impacts on both				
driving)	retrained and redeployed staff, as well as	6/30/2016	N/A	Completed	Pass & Complete
	new hires, particularly focusing on full and partial placements				
	5. Develop training strategy	3/31/2017	N/A	Completed	Pass & Complete
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



Save & Return

	Prin	t				-	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	,
Additional Workforce 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	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving	ivillestone	Date	Date	Status	Reviewer Status	Av Awarueu
		Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Complete	



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

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



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

Save & Return

Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Westchester Medical Center - Domain 1 Organizational AVs

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



Print

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



	Print					neuleur Center Domain 1 Orga	
		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	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



6	Prin	t			Westchester N	Medical Center - Domain 1 Orga	nizational 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							N/A
/Health Literacy		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	,
Topic Areas			ı				
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			I				
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

		Sec	tion 05 IT Systen	ns and Processe	S		
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	AV Awarded
Measure	Driving	willestoffe	Date	Date	Status	Reviewer 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).	12/31/2016	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	12/31/2016	N/A	Complete	Pass & Complete	N/A
		4. Develop a specific plan for engaging attributed members in Qualifying Entities	12/31/2016	N/A	Complete	Pass & Complete	
		5. Develop a data security and confidentiality plan.	6/30/2016	N/A	Complete	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	



	Print				Westchester N	Medical Center - Domain 1 Orga	inizational AVs
Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							IN/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

	Section 06 Performance Reporting						
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Establish reporting structure for PPS-wide performance reporting and communication.	9/30/2016	N/A	Completed	Pass & Complete	N/A
Performanc e Reporting	•	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	6/30/2016	N/A	Completed	Pass & Complete	N/A



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

		Sec	tion 07 Practitio	ner Engagement			
Process	AV	Milestone	Required Due	Committed Due	Milestone	Reviewer Status	A)/ Asserted
Measure	Driving	Milestone	Date	Date	Status	Reviewer Status	AV Awarded
		1. Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Completed	Pass & Complete	



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Practitioner Engagement	•	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	6/30/2016	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
-		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
_		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
dditional ractitioner	•		·	·			N/A
ngagement opic Areas	•	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



Save & Return		=
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Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Westchester Medical Center - Domain 1 Organizational AVs

Total 0

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



Print				Westchester N	Medical Center - Domain 1 Orga	ınizational
	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							N/A
Integration		2. Develop a Clinical Integration strategy.	12/31/2016	N/A	Completed	Pass & Complete	N/A
							N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	



Save & Return

	Print				Westchester N	Medical Center - Domain 1 Orgo	nizational AVs
Additional Clinical							N/A
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0



Save & Return

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

Print

AV Adjustment Scoresheet								
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted	Net A	100%
Adjustment	Project	Projects	Available	Net	Percentage		Net	Dorcontogo AV
	Project	Selected	Available	Awarded	AV	Avs	Awarded	Percentage Av
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%
Project Adjustments (applied to one project only)	Various	11.00	138.00	126.50	92%	0.00	126.50	92%
Total				181.50	94%	0.00	181.50	94%

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



Print

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

Westchester Medical Center - Project 2.a.i

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 2,398,271
DY3, Q2 Payment Earned	\$ 2,398,271

			2.a.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%	40%	9% 80%	1,918,617	1,918,617
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	40%	80%	1,918,617	1,918,617
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	20%	479,654	479,654
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%	479,654	479,654
Total Complete			20.00	20.00	100%	100%	100%	2,398,271	2,398,271

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	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded				
	Module 1 - Major risks to implementation and mitigation strategies Ongoing N/A Pass & Ongoing									
	Enter Reviewer Comment									

0.00



Save & Return

Print

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

Westchester Medical Center - Project 2.a.i

Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00
Enter Revie	wer Commen	t			

Total

Domain 1 Project Prescribed Milestones Project 2.a.i Required Milestone Committed AVs **AV Driving** Project Requirement and Metric/Deliverable **Reviewer Status Due Date** Awarded **Due Date** Status 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; Pass & Ongoing In Process N/A additionally, the IDS structure must include payers and social service 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 3/31/2017 Pass & Complete 3/31/2017 In Process N/A into an IDS. Enter Reviewer Comment 3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long 3/31/2017 3/31/2017 Pass & Complete In Process N/A term care and public health services. 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 Pass & Ongoing N/A In Process exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.



Enter Reviewer Comment							
5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.			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 Reviewer Comment							
8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A		
Enter Revie	wer Commer	nt					
9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	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
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	0.2
Enter Reviewer Comment		
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.2
Enter Reviewer Comment		
Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.
Enter Reviewer Comment		
Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.
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		
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)

Westchester Medical Center - 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)

Westchester Medical Center - Project 2.a.iii

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 1,970,008
DY3, Q2 Payment Earned	\$ 1,970,008

	2.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%	40%	40%	40%	40% 80%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%					80%	1,576,006	1,576,006						
	Patient Engagement Speed	Complete	1.00	1.00	100%													
	Domain 1 Subtotal		6.00	6.00	100%	40%	80%	1,576,006	1,576,006									
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	20%	394,002	394,002									
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%	394,002	394,002									
Total Complete			21.00	21.00	100%	100%	100%	1,970,008	1,970,008									

Total Project 2.a.iii AVs Awarded: 21 out of 21

Hide Reviewer Comments

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



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	Enter Reviewer Comment							
	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0.00		
	Enter Reviewer Comment							
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Pass & Ongoing	1		
	Enter Reviewer Comment							
	Total							

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



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



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

Westchester Medical Center - Project 2.a.iii

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Enter Reviewer Comment	
Total	0.00

	Domain 2 Pay for Performance and Pay for Reporting Project 2.a.iii		
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 19 years	Pass & Ongoing	0.25
	Enter Reviewer Comment		
	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25



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	Print		
	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
	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



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Enter Reviewer Comment		
ercent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and ble to participate in bidirectional exchange	Pass & Ongoing	1
Enter Reviewer Comment		
ercent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
Enter Reviewer Comment		
ercent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS eimbursement	Pass & Ongoing	1
Enter Reviewer Comment		
otentially Avoidable Emergency Room Visits	Pass & Ongoing	1
Enter Reviewer Comment		
otentially Avoidable Readmissions	Pass & Ongoing	1
Enter Reviewer Comment		
QI 90 – Composite of all measures +/-	Pass & Ongoing	1
Enter Reviewer Comment		
rimary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Enter Reviewer Comment Detentially Avoidable Emergency Room Visits Enter Reviewer Comment Enter Reviewer Comment	Pass & Ongoing Enter Reviewer Comment Enter Reviewer Comment Description of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS imbursement Enter Reviewer Comment Enter Reviewer Comment Description of the Indian State of the Indian Stat



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



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

Westchester Medical Center - Project 2.a.iv

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 2,312,618
DY3, Q2 Payment Earned	\$ 2,312,618

	2.a.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%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40% 809	80%	1,850,095	1,850,095
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	40%	80%	1,850,095	1,850,095
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	20%	462,524	462,524
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%	462,524	462,524
	Total	Complete	21.00	21.00	100%	100%	100%	2,312,618	2,312,618

Total Project 2.a.iv AVs Awarded: 21 out of 21

Hide Reviewer Comments

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



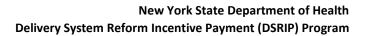
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Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00		
Enter Reviewer Comment							
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total					1.00		

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



	Print			West	chester Medical Center - P	roject 2.a.iv	
•	4. Ensure that all safety net providers participating in Medical Villages are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.			In Process	Pass & Ongoing	N/A	
	Enter Revie	wer Commer	nt				
	5. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
Total 0.00							

	Domain 2 Pay for Performance and Pay for Reporting Project 2.a.iv (all Milestones are P4R in DY2)							
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					





Print	tchester Medical Center -	Project 2.a.iv
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		



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

Westchester Medical Center - Project 2.a.iv

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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



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Print Westchester Medical Center - Project 2						
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				



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

Westchester Medical Center - Project 2.b.iv

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 1,841,529
DY3, Q2 Payment Earned	\$ 1,841,529

	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%	40%													
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			80%	1,473,223	1,473,223										
	Patient Engagement Speed	Complete	1.00	1.00	100%															
	Domain 1 Subtotal		6.00	6.00	100%	40%	80%	1,473,223	1,473,223											
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	20%	368,306	368,306											
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%	368,306	368,306											
	Total	Complete	21.00	21.00	100%	100%	100%	1,841,529	1,841,529											

Total Project 2.b.iv AVs Awarded: 21 out of 21

Hide Reviewer Comments

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



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	Enter Reviewer Comment							
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	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 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	
	1. Develop standardized protocols for a Care Transitions Intervention						
	Model with all participating hospitals, partnering with a home care	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	service or other appropriate community agency.						
	Enter Reviewer Comment						
	2. Engage with the Medicaid Managed Care Organizations and Health						
	Homes to develop transition of care protocols that will ensure			In Process	Pass & Ongoing	N/A	
	appropriate post-discharge protocols are followed.						
	Enter Reviewer Comment						
	3. Ensure required social services participate in the project.			In Process	Pass & Ongoing	N/A	
	Enter Reviewer Comment						



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

	Domain 2 Pay for 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						



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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



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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		



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Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

Print Potentially Avoidable Emergency Room Visits Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing Potentially Avoidable Readmissions 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



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

Westchester Medical Center - Project 2.d.i

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 2,131,977
DY3, Q2 Payment Earned	\$ 1,847,714

	2.d.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%	1,705,582	1,421,318			
	Patient Engagement Speed	Complete	1.00	0.00	0%							
	Domain 1 Subtotal		6.00	5.00	83%	40%	80%	1,705,582	1,421,318			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	20%	426,395	426,395			
Domain 2	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	50%	0%	-	-			
	Domain 2 Subtotal		4.00	4.00	100%	60%	20%	426,395	426,395			
	Total	Complete	10.00	9.00	90%	100%	100%	2,131,977	1,847,714			

Total Project 2.d.i AVs Awarded: 9 out of 10

Hide Reviewer Comments

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



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Enter Reviewer Comment						
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00	
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0	
Enter Reviewer Comment						
Total					0.00	

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



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Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quarter) Westchester Medical Center - Project 2.d.i

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



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



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	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
Total						0.00

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



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

Westchester Medical Center - Project 2.d.i



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

Westchester Medical Center - Project 3.a.i

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 3,302,281
DY3, Q2 Payment Earned	\$ 2,122,895

	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 (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40% 40%	1,320,912	1,320,912	
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal			6.00	100%	40%	40%	1,320,912	1,320,912
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	330,228	330,228
Domain 3	Domain 3 Pay for Performance Complete		7.00	2.00	29%	50%	50%	1,651,141	471,754
	Domain 3 Subtotal			4.00	44%	60%	60%	1,981,369	801,983
	Total	Complete	15.00	10.00	67%	100%	100%	3,302,281	2,122,895

Total Project 3.a.i AVs Awarded: 10 out of 15

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



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	Print Westchester Medical Center - 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
	•	 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					
	1	Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
3.a.i Model 1		Ent	er Reviewer	Comment			



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	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
	Enter Reviewer Comment					
	Total					0

	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	N/A	N/A		
	P4P Measure DY3Q2				



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

Westchester Medical Center - Project 3.a.i

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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	Fail	0
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



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Print	tchester Medical Center - I	Project 3.a.i
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		4.00



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

Westchester Medical Center - Project 3.a.ii

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 3,169,143
DY3, Q2 Payment Earned	\$ 2,037,307

	3.a.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%									
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		40%	1,267,657	1,267,657						
	Patient Engagement Speed	Complete	1.00	1.00	100%										
	Domain 1 Subtotal		6.00	6.00	100%	40%	40%	1,267,657	1,267,657						
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	316,914	316,914						
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	7.00	2.00	29%	50%	50%	1,584,572	452,735						
	Domain 2 Subtotal			4.00	44%	60%	60%	1,901,486	769,649						
	Total	Complete	15.00	10.00	67%	100%	100%	3,169,143	2,037,307						

Total Project 3.a.ii AVs Awarded: 10 out of 15

Hide Reviewer Comments

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



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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	Completed	Pass & Ongoing	1
Enter Reviewer Comment					
Total					1.00

	Domain 1 Project Prescribed Milestones Project 3.a.ii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.			In Process	Pass & Ongoing	N/A
	Enter Reviewer Comment					
	4. Develop written treatment protocols with consensus from participating providers and facilities.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A



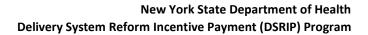
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	Enter Revie	Enter Reviewer Comment					
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017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



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

	Domain 3 Pay for 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	N/A	N/A				
	P4P Measure DY3Q2						
	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1				
	P4P Measure DY3Q2						





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Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Fail	0
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



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	P4P Measure DY3Q2				
	Screening for Clinical Depression and follow-up	Pass & Ongoing	1		
P4R Measure DY3Q2					
	Total		4.00		



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

Westchester Medical Center - Project 3.c.i

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 2,569,576
DY3, Q2 Payment Earned	\$ 2,569,576

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%		40%	1,027,830	1,027,830				
	Patient Engagement Speed	Complete	1.00	1.00	100%								
	Domain 1 Subtotal		6.00	6.00	100%	40%	40%	1,027,830	1,027,830				
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	60%	1,541,745	1,541,745				
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%	1,541,745	1,541,745					
Total Complete		12.00	12.00	100%	100%	100%	2,569,576	2,569,576					

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

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



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	Enter Reviewer Comment						
	Module 2 - Project Implementation Speed	Ongoing	N/A	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 Project 3.c.i						
AV Driving	Project Requirement and Metric/Deliverable	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Commer	nt					
	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 Commer	nt					
	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		



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



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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



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

Westchester Medical Center - Project 3.d.iii

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 2,655,228
DY3, Q2 Payment Earned	\$ 2,323,325

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%	1,062,091	1,062,091
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	40%	40%	1,062,091	1,062,091
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	10%	265,523	265,523
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	2.00	1.50	75%	50%	50%	1,327,614	995,711
	Domain 2 Subtotal		8.00	7.50	94%	60%	60%	1,593,137	1,261,233
	Total	Complete	14.00	13.50	96%	100%	100%	2,655,228	2,323,325

Total Project 3.d.iii AVs Awarded: 13.5 out of 14

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



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Enter Reviewer Comment							
Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00		
Enter Revie	ewer Commer	t					
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total							

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



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

Domain 3 Pay for Performance and Pay for Reporting						
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1			
	P4P Measure DY3Q2					
	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5			
	P4P Measure DY3Q2					
	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Fail	0			
	P4P Measure DY3Q2					
	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1			
	P4R Measure DY3Q2					
	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1			



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	P4R Measure DY3Q2		
	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
	P4R Measure DY3Q2		



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

Westchester Medical Center - Project 4.b.i

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

Payment Snapshot	
DY3, Q2 Payment Available	\$ 1,970,008
DY3, Q2 Payment Earned	\$ 1,970,008

	4.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%	40%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		40% 40%	788,003	788,003			
	Patient Engagement Speed	N/A	0.00	0.00	0%							
	Domain 1 Subtotal		5.00	5.00	100%	40%	40%	788,003	788,003			
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	60%	60%	1,182,005	1,182,005			
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-			
Domain 4 Subtotal			17.00	17.00	100%	60%	60%	1,182,005	1,182,005			
	Total	Complete	22.00	22.00	100%	100%	100%	1,970,008	1,970,008			

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

Hide Reviewer Comments

	Domain 4 Pay for Performance and Pay for Reporting Project 4.b.i (all Milestones are P4R in DY2)					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1			



Drint

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		



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



Save & Return Achievement Value (AV) Scorecard DY3, Q2 July 1, 2017 - September 30, 2017 (Payment Quar						
	Print Westchester Medical Center - Project					
	Enter Reviewer Comment					
	Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ years	Pass & Ongoing	1			
	Enter Reviewer Comment					
	Total		17.00			



Print

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

Westchester Medical Center - 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			

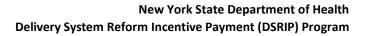
Payment Snapshot	
DY3, Q2 Payment Available	\$ 1,456,093
DY3, Q2 Payment Earned	\$ 1,456,093

	4.b.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%			582,437	582,437
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40%	40% 582,4		
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Project Implementation Speed N/A			5.00	5.00	100%	40%	40%	582,437	582,437
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	60%	60%	873,656	873,656
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%	873,656	873,656
	Total	Complete	22.00	22.00	100%	100%	100%	1,456,093	1,456,093

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

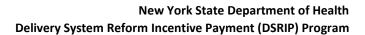
Hide Reviewer Comments

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	chester Medical Center - I	Project 4.b.ii
	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)

Westchester Medical Center - Project 4.b.ii

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



Save & Return

Print Westchester Medical Center - Project 4.b.ii					
	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		