

Achievement Value (AV) Scorecard The New York and Presbyterian Hospital

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

	Functionality	
Step	Description/Link	Image
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All
	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Link (dick on the purple link below to access each leichdual project report) Comman (= Organizational (All Projects) All Adjustments (column t) 2 a.i. 2 a.ii. 2 a.v. 2.av
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
The New York and Presbyterian Hospital

	PPS Information
Quarter	DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
PPS	The New York and Presbyterian Hospital
PPS Number	39

A	Achievement A	/alue (AV) Sco	recard Summa	ary		
Project Link (click on the purple link below to access		AV I	Data		Payme	ent Data
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY3, Q4 Payment Available	DY3, Q4 Payment Earned
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment
2.a.i	29.00	24.40	0.00	24.40	\$ 1,631,603	\$ 1,033,996
2.b.i	30.00	25.67	0.00	25.67	\$ 1,144,459	\$ 739,811
2.b.iii	29.00	23.83	0.00	23.83	\$ 1,259,874	\$ 766,423
2.b.iv	29.00	24.83	0.00	24.83	\$ 1,169,014	\$ 763,106
3.a.i	16.00	10.50	0.00	10.50	\$ 680,443	\$ 432,568
3.a.ii	15.00	11.50	0.00	11.50	\$ 675,355	\$ 506,516
3.e.i	13.00	11.00	0.00	11.00	\$ 593,423	\$ 479,684
3.g.i	11.00	11.00	0.00	11.00	\$ 629,491	\$ 629,491
4.b.i	22.00	22.00	0.00	22.00	\$ 482,188	\$ 482,188



Total

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

180.74 \$

0.00

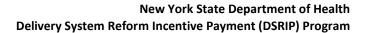
8,668,530 \$

6,236,462

Print Summary Print All				The	Achievement \ e New York and P	(AV) Scorecard terian Hospital
4.c.i	16.00	16.00	0.00	16.00	\$ 402,680	\$ 402,680
AV Adjustments (Column F)						

180.74

210.00





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Do	omain I Organizati	onal Scoresheet				
Domain I Organizational	Review Status	AVs Available	AVs Awarded	Adjustments	Net AVs	AV Percentage
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

	Workforce Strategy	
Workforce Strategy Budget Updates		
Budget Updates		



	Define target workforce state (in line with DSRIP program's goals)	3/31/2016	N/A	Completed	Pass & Complete
	Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing
dditional Vorkforce trategy	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	9/30/2016	N/A	Completed	Pass & Complete
udget					
Updates (non AV- driving)	4. Produce a compensation and benefit analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and partial placements	6/30/2016	N/A	Completed	Pass & Complete
	5. Develop training strategy	12/31/2016	N/A	Completed	Pass & Complete
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



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		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
Additional Workforce	•	Roles and Responsibilities	N/A	N/A	In Process	
Strategy Topic Areas		Key Stakeholders	N/A	N/A	In Process	N/A
	•	IT Expectations	N/A	N/A	In Process	
		Progress Reporting	N/A	N/A	In Process	
			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	
		Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	



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Quarterly Project						
Reports, Project		Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	
Budget and Flow of						
		Quarterly Progress Reports	N/A	N/A	In Process	

		Section 02 - Go	overnance		
	1. Finalize governance structure and sub- committee structure	6/30/2015	N/A	Completed	
Governance	2. Establish a clinical governance structure, including clinical quality	12/31/2015	N/A	Completed	
Structure Updates	committees for each DSRIP project				
	Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	
	committee dandennes where applicable			ı	



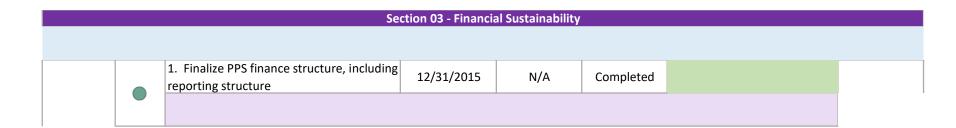
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Governance Process		Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Jpdate							
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	N/A	Completed	Pass & Complete	
		6. Finalize partnership agreements or					
		contracts with CBOs	9/30/2016	N/A	Completed	Pass & Complete	
dditional							
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	3/31/2016	N/A	Completed	Pass & Complete	N/A
Iriving)							
		8. Finalize workforce communication and engagement plan	12/31/2015	N/A	Completed	Pass & Complete	
		9. Inclusion of CBOs in PPS Implementation	3/31/2017	N/A	Completed	Pass & Complete	
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	



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	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
	Roles and Responsibilities	N/A	N/A	In Process	
Additional Governance -		I			IN/A
Topic Areas	Key Stakeholders	N/A	N/A	In Process	
		I			
	IT Expectations	N/A	N/A	In Process	
		ı			
	Progress Reporting	N/A	N/A	In Process	





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	Perform network financial health current state assessment and develop	3/31/2016	N/A	Completed	Pass & Complete
	financial sustainability strategy to address key issues.		,	, , , , , , , , , , , , , , , , , , ,	· ·
Financial					
Stability Update	3. Finalize Compliance Plan consistent with New York State Social Services Law	12/31/2015	N/A	Completed	Pass & Complete
	363-d	, , , , ,	,	, , , , , , , , , , , , , , , , , , ,	· ·
	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
	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Additional Financial					
Stability Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing

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

		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
		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	



					Ī
Additional Cultural Competency	Roles and Responsibilities	N/A	N/A	In Process	
/Health Literacy	Key Stakeholders	N/A	N/A	In Process	14/2
Topic Areas					
	IT Expectations	N/A	N/A	In Process	
	Progress Reporting	N/A	N/A	In Process	

	Sect	ion 05 - IT Systen	ns and Processe	S	
•	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).	3/31/2016	N/A	Complete	
	Develop an IT Change Management Strategy.	N/A	N/A	In Process	



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
	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.	N/A	N/A	In Process	Pass & Ongoing
	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing
Additional IT Systems and	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing
Processes Topic Areas					
	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing



•	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				

		Sec	ction 06 - Perforn	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Double	•	Establish reporting structure for PPS-wide performance reporting and communication.	3/31/2016	N/A	Completed	Pass & Coomplete	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 (with Exception) & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Whitigation structeres					
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
			ı				
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

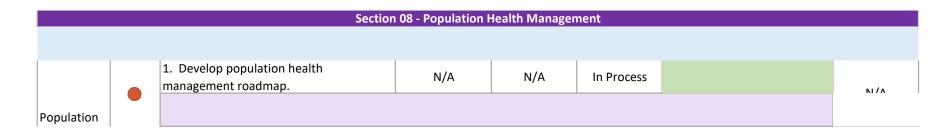


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Additional Performanc e Reporting Topic Areas							N/A
		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	tion 07 - Practitio	ner Engagement	ļ.		
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Practitioner Engagement		1. Develop Practitioners communication and engagement plan.	N/A	N/A	In Process	Pass & Ongoing	
		2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your	N/A	N/A	In Process	Pass & Ongoing	N/A
		PPS-specific quality improvement agenda.					
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	



Additional Practitioner		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process		
			ı				
		Roles and Responsibilities	N/A	N/A	In Process		
			ı				
Engagement Topic Areas	•	Key Stakeholders	N/A	N/A	In Process		
		IT Expectations	N/A	N/A	In Process		
							ļ
		Progress Reporting	N/A	N/A	In Process		



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Health						
Tealth		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	NI/A
						KI7A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
	•	Roles and Responsibilities	N/A	N/A	In Process	
Additional Population						IN/A
Health Topic Areas		Key Stakeholders	N/A	N/A	In Process	NA
		IT Expectations	N/A	N/A	In Process	
		Progress Reporting	N/A	N/A	In Process	



Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		1. Perform a clinical integration 'needs assessment'.	3/31/2017	N/A	Completed	Pass & Complete	NI/A
Clinical							
Integration		2. Develop a Clinical Integration strategy.	3/31/2017	N/A	In Process	Pass & Complete	NI/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							13/6
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



1	Save & Return	Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31,			
7	Print	The New York and Presbyterian Hospital - Domain 1 Orgo	ınizational AVs		
		Total	0		



Save & Return

Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital AV Adjustments

AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AVs	Awarded	Adjusted Net AVs Awarded		NVs Awarded	
Adjustment	Projects		Available	Net	Percentage	Aujusteu AVs	Net	Deventors 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	160.00	130.74	82%	0.00	130.74	82%	
Total			210.00	180.74	86%	0.00	180.74	86%	

Hide Reviewer Comments

□ Organizational

☐ Project Adjustments

No AV Adjustments



Please note that there are no AV adjustments for The New York and Presbyterian Hospital in DY2, Q1





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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 1,631,603
DY3, Q4 Payment Earned	\$ 1,033,996

2.a.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				404,016
Domain 1	Project Implementation Speed	Complete	1.00	0.57	57%	40%	27%	435,094	
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.57	93%	40%	27%	435,094	404,016
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	108,774	108,774
Domain 2	Domain 2 Pay for Performance (P4P	Complete	8.00	3.83	48%	50%	67%	1,087,736	521,207
	Domain 2 Subtotal			18.83	82%	60%	73%	1,196,509	629,980
	Total	Complete	29.00	24.40	84%	100%	100%	1,631,603	1,033,996

Total Project 2.a.i AVs Awarded: 24.4 out of 29

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	N/A			
	Enter Reviewer Comment								



	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.57
	Enter Revie	wer Commer	nt			
Total						0.57

	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 organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Fail	0.00			
	Enter Reviewer Comment								
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	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.	3/31/2018	3/31/2018	Completed	Pass & Complete				



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	Enter Reviewer Comment						
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	0.00	
	Enter Revie	wer Commer	nt				
	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14	
	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.	3/31/2018	3/31/2018	Completed	Fail	0.00	
	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	Completed	Pass & Complete	N/A	
	Enter Revie						
					Pass & Complete	0.14	
	Enter Revie	wer Commer	nt				



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	11. Engage patients in the integrated delivery system through outreach				
	and navigation activities, leveraging community health workers, peers,	3/31/2018	3/31/2018	Completed	0.14
	and culturally competent community-based organizations, as			·	
	Domain 2 Pay for Report	ting - Proiect	2.a.i		
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years				0.3333333
					0.3333333
_					0.333333
					1
					0.3333333
					1
					0.25
					0.25



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Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
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	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	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 criterable to participate in bidirectional exchange	ria and Pass & Ongoing	



15.00

Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 2.a.i Print Enter Reviewer Comment Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing 0.5 Enter Reviewer Comment Pass & Ongoing 0.5 Enter Reviewer Comment

Total



Save & Return

rimt	
Domain 2 Pay for Performance - Project 2.a.i	
Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.i

	Project Snapshot				
Project Domain System Transformation Projects (Domain 2)					
Project ID 2.b.i					
Project Title	Ambulatory ICUs				

Payment Snapshot	
DY3, Q4 Payment Available	\$ 1,144,459
DY3, Q4 Payment Earned	\$ 739,811

	2.b.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	40%				
Domain 1	Project Implementation Speed	Complete	1.00	0.83	83%		27%	305,189	297,923	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	6.83	98%	40%	27%	305,189	297,923	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	76,297	76,297	
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.83	48%	50%	67%	762,972	365,591	
	Domain 2 Subtotal			18.83	82%	60%	73%	839,270	441,888	
	Total	Complete	30.00	25.67	86%	100%	100%	1,144,459	739,811	

Total Project 2.b.i AVs Awarded: 25.67 out of 30

Hide Reviewer Comments

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

Save & Return

Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.83
Enter Revie	wer Commer	nt			
				Pass & Ongoing	1
Enter Revie	wer Commer	nt			
Total					1.83

	Domain 1 Project Prescribed Milestones - Project 2.b.i							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17		
	Enter Reviewer Comment							
	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17		
	Enter Reviewer Comment							
	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie							
					Pass & Complete	N/A		



Print						
Enter Revie	wer Commer	nt				
5. Ensure that all safety net project participants are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including Direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17	
Enter Revie	wer Commer	nt				
6. Ensure that EHR systems used by participating providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	0.00	
Enter Revie	wer Commer	nt				
7. Implementation of a secure patient portal that supports patient communication and engagement as well as provides assistance for self-management.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17	
Enter Reviewer Comment						
8. Establish a multi-disciplinary, team-based care review and planning process to ensure that all Ambulatory ICU patients benefit from the input of multiple providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
Enter Reviewer Comment						
9. Deploy a provider notification/secure messaging system to alert care managers and Health Homes of important developments in patient care and utilization.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.17	
Enter Reviewer Comment						
				Pass & Ongoing	N/A	
Enter Revie	wer Commer	nt				
Total					0.83	



Save &	Return

Domain 2 Pay for Reporting Project 2.b.i	
Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0.3333333
	0.3333333
	0.3333333
	1
	0.25
	0.25
	0.25



Save & Return

Print		
Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	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		
	Pass & Ongoing	1
Enter Reviewer Comment		



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (F The New York and Presbyterian Hosp	
Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	1
	1
	1
	1
	0.5
	0.5
Domain 2 Pay for Performance Project 2.b.i	
Adult Access to Preventive or Ambulatory Care - 20 to 44 years	

Save & Return	Achievement Value (AV) Scorecard DY3, Q4 January	y 1, 2018 - March 31, 2018 (Payn	nent Quarter)
Print	The New	v York and Presbyterian Hospital	- Project 2.b.i
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	0.3333333
	Enter Reviewer Comment		
_		Fail	0
	Enter Reviewer Comment		
_		Pass & Ongoing	0.25
	Enter Reviewer Comment		
_		Pass & Ongoing	0.25
	Enter Reviewer Comment		_
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		Pass & Ongoing	1
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	5.1.0	Fail	0
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	Fator Davisores Comment	Pass & Ongoing	1
_	Enter Reviewer Comment	Dass 9 Ongoing	0.5
	Fator Daviouar Command	Pass & Ongoing	0.5
	Enter Reviewer Comment	Dage 9 Ongoing	٥٢
•	Enter Reviewer Comment	Pass & Ongoing	0.5
	Total		3.83



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iii

Project Snapshot						
Project Domain System Transformation Projects						
Project ID 2.b.iii						
Project Title	ED care triage for at-risk populations					

Payment Snapshot	
DY3, Q4 Payment Available	\$ 1,259,874
DY3, Q4 Payment Earned	\$ 766,423

	2.b.iii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27% 335,966		279,972
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			335,966	
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	40%	27%	335,966	279,972
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	83,992	83,992
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.83	48%	50%	67%	839,916	402,460
	Domain 2 Subtotal			18.83	82%	60%	73%	923,908	486,451
	Total	Complete	29.00	23.83	82%	100%	100%	1,259,874	766,423

Total Project 2.b.iii AVs Awarded: 23.83 out of 29

Hide Reviewer Comments

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



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Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
Enter Revie					
				Fail	0
Enter Revie	wer Commen	nt			
Total					0.00

	Domain 1 Project Prescribed M	ilestones - Pr	oject 2.b.iii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
•	 Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. Develop process and procedures to establish connectivity between the emergency department and community primary care providers. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iii

•	3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
•	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	wer Commen 3/31/2017	3/31/2017	Completed		N/A
						N/A

	Domain 2 Pay for Reporting Project 2.b.iii					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0.3333333			
	Enter Reviewer Comment					



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 201 The New York are	8 - March 31, 2018 (Paymo d Presbyterian Hospital - I	
Enter Reviewer Comment		
	Pass & Ongoing	0.3333333
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 2.b.iii Print Enter Reviewer Comment Pass & Ongoing 1 Enter Reviewer Comment 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 Pass & Ongoing 1 to participate in bidirectional exchange Enter Reviewer Comment Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing

	Save & Return Print	Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 The New York and	- March 31, 2018 (Payme Presbyterian Hospital - P	
	_			1
_				0.5
				0.5

Domain 2 Pay for Performance Project 2.b.iii					
Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0				
	0				
	0.333333				
	0				
	0.25				
	0.25				



Save & Return	Achievement Value (AV) Scorecard DY3, Q4 January		-
Print	The New Yo	ork and Presbyterian Hospital - P	roject 2.b.iii
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Fail	0
	Enter Reviewer Comment		
		Pass & Ongoing	1
	Enter Reviewer Comment		
		Pass & Ongoing	0.5
	Enter Reviewer Comment		
		Pass & Ongoing	0.5
	Enter Reviewer Comment		
	Total		3.83



Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 1,169,014
DY3, Q4 Payment Earned	\$ 763,106

	2.b.iv Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%	311,737	311,737
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	40%	27%	311,737	311,737
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	77,934	77,934
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	3.83	48%	50%	67%	779,343	373,435

Total Project 2.b.iv AVs Awarded: 24.83 out of 29

Hide Reviewer Comments

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



Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 2.b.iv

Print						
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
					Pass & Ongoing	1
	Enter Reviewer Comment					
	Total					1.00

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



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter The New York and Presbyterian Hospital - Project 2.b.						-
	Enter Revie	ewer Commen	t			
	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		N/A
_						N/A
						N/A
	Domain 2 Pay for Report	ing Project 2	2.b.iv			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years					0.3333333
						0.3333333
						0.3333333



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 2.b.iv

Print		
CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	0.25
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



Save & Return Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 2.b.iv

PIIIL		
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		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



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Save & Return Print Primary Care - Length of Relationship - Q3 Enter Reviewer Comment Enter Reviewer Comment Enter Reviewer Comment Enter Reviewer Comment

Total

	Domain 2 Pay for Performance Project 2.b.iv		
AV Driving	Measure	Reviewer Status	Avardad
		Fail	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Fail	
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		Pass & Ongoing	



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	Enter Reviewer Comment	
	Fail	0
	Enter Reviewer Comment	
	Fail	0
	Enter Reviewer Comment	
	Pass & Ongoing	1
	Enter Reviewer Comment	
	Pass & Ongoing	0.5
	Enter Reviewer Comment	
	Pass & Ongoing	0.5
	Enter Reviewer Comment	
	Total	3.83



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 680,443
DY3, Q4 Payment Earned	\$ 432,568

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		40%		
Domain 1	Project Implementation Speed	Complete	1.00	0.00	0%	40%		272,177	194,412
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		7.00	5.00	71%	40%	40%	272,177	194,412
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	68,044	68,044
Domain 5	Domain 3 Pay for Performance	Complete	7.00	3.50	50%	50%	50%	340,222	170,111
	Domain 3 Subtotal			5.50	61%	60%	60%	408,266	238,155
	Total Complete		16.00	10.50	66%	100%	100%	680,443	432,568

Total Project 3.a.i AVs Awarded: 10.5 out of 16

Hide Reviewer Comments

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



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.i

Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00
					0

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3							
□ 3.a.i Model 1 □ 3.a.i Model 2 □ 3.a.i Model 3							
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
		5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	Completed		0
							N/A
		En	ter Reviewer	Comment			
3.a.i Model 2	•	7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed		0
	Enter Reviewer Comment					-	



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.i

Enter Reviewer Comment

Domain 3 Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5		
	P4R Measure DY3, Q4				
			0.5		
	P4R Measure DY3, Q4				
			1		
	P4R Measure DY3, Q4				

Domain 3 Pay for Performance					
AV Driving	Measure	Reviewer Status	AVS		
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0		
	P4P Measure DY3, Q4				
			0.5		
	P4P Measure DY3, Q4				
	Antidepressant Medication Management - Effective Continuation Phase Treatment		0		



Save & Return

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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.i

Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
P4P Measure DY3, Q4		
	Pass & Ongoing	1
P4P Measure DY3, Q4		
	Pass & Ongoing	0.5
P4P Measure DY3, Q4		
	Pass & Ongoing	0.5
P4P Measure DY3, Q4		
	Fail	0
P4P Measure DY3, Q4		
	Fail	0
P4P Measure DY3, Q4		
	Fail	0
P4P Measure DY3, Q4		
Total		3.50



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - 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, Q4 Payment Available	\$ 675,355
DY3, Q4 Payment Earned	\$ 506,516

	3.a.ii Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	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%	270,142	270,142			
	Patient Engagement Speed	Complete	1.00	1.00	100%							
	Domain 1 Subtotal		6.00	6.00	100%	40%	40%	270,142	270,142			
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	67,535	67,535			
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	7.00	3.50	50%	50%	50%	337,677	168,839			
	Domain 2 Subtotal			5.50	61%	60%	60%	405,213	236,374			
	Total Complete		15.00	11.50	77%	100%	100%	675,355	506,516			

Total Project 3.a.ii AVs Awarded: 11.5 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	
	Enter Reviewer Comment						



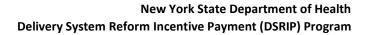
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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.ii

	Print					-
	Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
					Pass & Ongoing	1
	Enter Revie	ewer Commen	nt			
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.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Revie							
					Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					





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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.a.ii

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



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 The New York and	3 - March 31, 2018 (Payme d Presbyterian Hospital - F	
Domain 3 Pay for Reporting		
Follow-up care for Children Prescribed ADHD Medications - Continuation Phase		0.5
		0.5
		1
Domain 3 Pay for Performance		
Adherence to Antipsychotic Medications for People with Schizophrenia		0



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 3.a.ii

Print Print	The New York and Presbyterian Hospital - Project 3.a.ii				
Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5			
P4P Measure DY3, Q4					
	Fail	0			
P4P Measure DY3, Q4					
P4P Measure DY3, Q4					
	Pass & Ongoing	1			
P4P Measure DY3, Q4					
	Pass & Ongoing	1			
P4P Measure DY3, Q4					
	Pass & Ongoing	0.5			
P4P Measure DY3, Q4					
	Pass & Ongoing	0.5			
P4P Measure DY3, Q4					
	Fail	0			
P4P Measure DY3, Q4					



Save & Return	n	Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018	- March 31, 2018 (Payme	nt Quarter)
Print		The New York and	d Presbyterian Hospital - F	Project 3.a.ii
Initiation of Alc	ohol and Other Drug Depe	ndence Treatment (1 visit within 14 days)		0

	Total		3.50
	P4P Measure DY3, Q4		
		Fail	0
P4P Measure DY3, Q4			
	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)		0



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

Project ID	
	Comprehensive project to decrease HIV/AIDS
Project Title	transmission—development of Center of
	Excellence management of HIV/AIDS

Payme	ent Snapshot	
DY3, Q4 Payment Available	\$	593,423
DY3, Q4 Payment Earned		

	3.e.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40%	40%	237,369	197,808
	Patient Engagement Speed	ement Speed Complete 1.00 0.00 0%							
	Domain 1 Subtotal		6.00	5.00	83%	40%	40%	237,369	197,808
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	3.00	3.00	100%	10%	10%	59,342	59,342
Domain 5	Domain 3 Pay for Performance	Complete	4.00	3.00	75%	50%	50%	296,711	222,534
	Domain 3 Subtotal			6.00	86%	60%	60%	356,054	281,876
Total Complete			13.00	11.00	85%	100%	100%	593,423	479,684

Total Project 3.e.i AVs Awarded: 11 out of 13

Hide Reviewer Comments

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



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0	
	Enter Reviewer Comment						
	Module 3 - Patient Engagement Speed	Ongoing	N/A	Completed	Fail	0	
Enter Reviewer Comment							
Total						0	

	Domain 1 Project Prescribed Milestones - Project 3.e.i Models 1, 2 and 3								
		□ 3.e.i Model 1	☑ 3.e.i Mo	odel 2					
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
		8. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
		Enter Reviewer Comment							
	•	9. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment									
		10. Co-locate care management services including Health Home care managers for those eligible for Health Homes.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A		
		En	ter Reviewer	Comment					



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 3.e.i

		11. Develop a referral process and connectivity for referrals of people who qualify for but are not yet in a Health Home.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
		12. Ensure understanding and compliance with evidence-based guidelines for management of HIV/AIDS (and HCV)	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
3.e.i Model 2		13. Ensure coordination of care between all available services preferably through a single electronic health/medical/care management record.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
	•	14. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms 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 ups, by the end of DY 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Enter Reviewer Comment						
		15. Ensure that EHR systems or other IT platforms, used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	9/30/2017	9/30/2017	Completed	Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				
						Pass & Complete	N/A	
		Ent	ter Reviewer	Comment				



	Save & Return	Achievement Value (AV) Scorecard			- March 31, 2018 (Paym nd Presbyterian Hospital	
	Print	17. Seek designation as center of excellence from New York State Department of Health.	9/30/2017	9/30/2017	Completed		N/A
		Domain 3 Pay for Performance and Pay for Reportin	g - Project 3.e	e.i (all Milesto	ones are P4R	in DY1)	
•	Cervical Cancer	Screening					1
•							0.333333
_							0.333333
							0.333333
_							1



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.e.i

_	FIIII	
	Domain 3 Pay for Performance and Pay for Reporting - Project (all Milestones are P4R in D	Y1)
	HIV/AIDS Comprehensive Care: Engaged in Care	0
		1
		1
		1



Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.g.i

Project Snapshot					
Project Domain	Clinical Improvement Projects (Domain 3)				
Project ID	3.g.i				
Project Title	Integration of palliative care into the PCMH model				

Payment Snapshot	
DY3, Q4 Payment Available	\$ 629,491
DY3, Q4 Payment Earned	\$ 629,491

		3.g.i Scores	neet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	27%		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			167,864	167,864
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	40%	27%	167,864	167,864
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	10%	73%	461,627	461,627
Domain 5	Domain 3 Pay for Performance (P4P)	N/A	N,	/A	100%	50%	0%	-	-
	Domain 2 Subtotal			5.00	100%	60%	73%	461,627	461,627
	Total	Complete	11.00	11.00	100%	100%	100%	629,491	629,491

Total Project 3.g.i AVs Awarded: 11 out of 11

Hide Reviewer Comments

	Domain 1 Project Milestones Project 3.g.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		
	Enter Reviewer Comment							



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 3.g.i

E	Print					
	Module 2 - Project Implementation Speed	3/17/2017	3/17/2017	Completed	Pass & Complete	0.00
	Enter Reviewer Comment					
					Pass & Ongoing	1
	Enter Revie	ewer Commen	nt			

Total

	Domain 1 Project Prescribed Milestones - Project 3.g.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Integrate Palliative Care into appropriate participating PCPs that have, or will have, achieved NCQA PCMH and/or APCM certification.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Develop partnerships with community and provider resources including						
	Hospice to bring the palliative care supports and services into the	3/31/2017	3/31/2017	Completed	Fail	N/A	
	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
					Fail		



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2 The New York	018 - March 31, 2018 (Payme and Presbyterian Hospital -	
		N/A
Domain 3 Pay for Performance and Pay for Reporting - Project 3.g.i		
Percentage of members who remained stable or demonstrated improvement in pain		1
		1
		1
		1
		1



Save & Return

Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

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

Payment Snapshot	
DY3, Q4 Payment Available	\$ 482,188
DY3, Q4 Payment Earned	\$ 482,188

		4.b.i Scores	heet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	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%		192,875	192,875
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	40%	40%	192,875	192,875
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	60%	60%	289,313	289,313
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%	289,313	289,313
	Total Complete		22.00	22.00	100%	100%	100%	482,188	482,188

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					
	Enter Reviewer Comment							



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

Print		
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 4.b.i

Print		_
Percentage of children and adolescents who are obese	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



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Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.b.i

Print

Total 17.00



Print

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)

The New York and Presbyterian Hospital - Project 4.c.i

Project Snapshot			
Project Domain Domain 4: Population-wide Projects: New York's			
Project ID	4.c.i		
Project Title	Decrease HIV morbidity		

Payment Snapshot	
DY3, Q4 Payment Available	\$ 402,680
DY3, Q4 Payment Earned	\$ 402,680

	4.c.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY3)	Domain Funding % (DY3, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%	40%	40% 161			
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			161,072	161,072	
	Patient Engagement Speed	N/A	0.00	0.00	0%					
	Domain 1 Subtotal		5.00	5.00	100%	40%	40%	161,072	161,072	
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	60%	60%	241,608	241,608	
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-	
	Domain 4 Subtotal			11.00	100%	60%	60%	241,608	241,608	
Total Complete		Complete	16.00	16.00	100%	100%	100%	402,680	402,680	

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

Hide Reviewer Comments

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



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

Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) The New York and Presbyterian Hospital - Project 4.c.i

Print		-
Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



Save & Return Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Qual The New York and Presbyterian Hospital - Project				
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years		1	
	Enter Reviewer Comment			
		Pass & Ongoing	1	
	Enter Reviewer Comment			
	Total		11.00	