

#### Achievement Value (AV) Scorecard Westchester Medical Center

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

	Functionality	
Step	Description/Link	Image
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All
2. Access Detailed Project Reports and return to AV	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 flink below to access each biodividual project report)  Domain 1- Organizations (All Projects)  AV Adjustments (column 1)  2 a 1  2 a 18  2 a 18  2 a 19  2 a 19  2 a 19  2 a 19
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, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter)
PPS	Westchester Medical Center
PPS Number	21

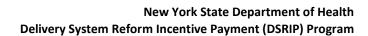
Achievement Value (AV) Scorecard Summary								
Project Link (click on the purple link below to access		AV I	Data	Payment Data				
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY3, Q4 Payment Available	DY3, Q4 Payment Earned		
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00		nds are embedded oject's payment		
2.a.i	29.00	24.80	0.00	24.80	\$ 7,194,812	\$ 4,755,143		
2.a.iii	30.00	25.68	0.00	25.68	\$ 5,910,024	\$ 3,891,001		
2.a.iv	30.00	26.08	0.00	26.08	\$ 6,937,855	\$ 4,673,416		
2.b.iv	30.00	26.08	0.00	26.08	\$ 5,524,588	\$ 3,721,424		
2.d.i	14.00	12.00	0.00	12.00	\$ 6,395,932	\$ 5,045,680		
3.a.i	16.00	11.00	0.00	11.00	\$ 3,302,281	\$ 2,146,483		
3.a.ii	16.00	11.50	0.00	11.50	\$ 3,169,143	\$ 2,150,490		
3.c.i	12.00	12.00	0.00	12.00	\$ 2,569,576	\$ 2,569,576		
3.d.iii	12.00	11.00	0.00	11.00	\$ 2,655,228	\$ 1,991,421		



# Print Summary Print All

Achievement Value (AV) Scorecard Westchester Medical Center

Total	233.00	204.15	0.00	204.15	\$ 47,085,541	\$ 34,370,734
AV Adjustments (Column F)						
4.b.ii	22.00	22.00	0.00	22.00	\$ 1,456,093	\$ 1,456,093
4.b.i	22.00	22.00	0.00	22.00	\$ 1,970,008	\$ 1,970,008





Save & Return

Print

Domain I Organizational 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		Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed			
Budget Updates								



	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	
al altat a man	Perform detailed gap analysis between					
dditional /orkforce trategy	current state assessment of workforce and projected future state	3/31/2017	N/A	Completed	Pass & Complete	
udget						1
pdates non AV- riving)	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	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	
-	Roles and Responsibilities	N/A	N/A	In Process	
Additional Workforce	Notes und Responsibilities	IN/A	IV/A	III T TOCC33	N/A
Strategy Topic Areas	Key Stakeholders	N/A	N/A	In Process	N/A
	IT Expectations	N/A	N/A	In Process	
		.,,,,,	14.1		
	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	



Quarterly Project					
Reports, Project	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	1
Budget and Flow of					
1 1					
	Quarterly Progress Reports	N/A	N/A	In Process	

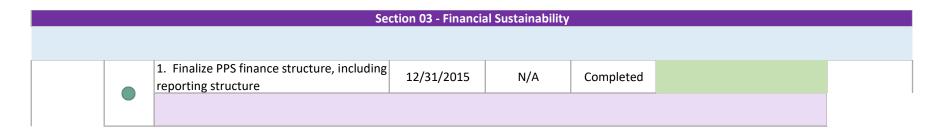
	Section 02 - Governance						
		1. Finalize governance structure and subcommittee structure	9/30/2016	N/A	Completed		
Governance Structure		Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	N/A	Completed		
Updates							
		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed		



Governance Process		Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete	
Jpdate							
Additional – Governance Milestones (non AV- driving)	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	6/30/2016	N/A	Completed	Pass & Complete	
		6. Finalize partnership agreements or		_			
		contracts with CBOs	3/31/2016	N/A	Completed	Pass & Complete	
	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	12/31/2016	N/A	Completed	Pass & Complete	N/A
-		Finalize workforce communication and engagement plan	3/31/2017	N/A	Completed	Pass & Complete	
		engagement prant					
		9. Inclusion of CBOs in PPS Implementation	3/31/2016	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	
-						
Additional		Roles and Responsibilities	N/A	N/A	In Process	
Governance - 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	





	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
	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



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

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

	Section 05 - IT Systems and Processes								
•	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					
	Develop an IT Change Management     Strategy.	12/31/2016	N/A	Complete					



LT.C.						
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
	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	
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 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
	•	Establish reporting structure for PPS-wide performance reporting and communication.	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	

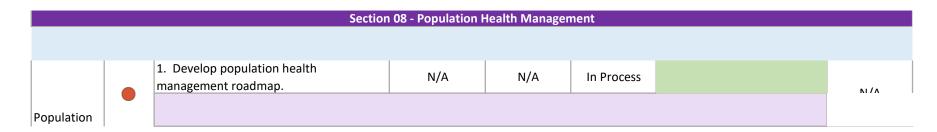


Additional Performanc						N/A
e Reporting Topic Areas	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	N/A
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				0

	Section 07 - Practitioner Engagement									
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded			
Practitioner Engagement		Develop Practitioners communication and engagement plan.	3/31/2016	N/A	Completed	Pass & Complete				
		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	
-						
lditional		Roles and Responsibilities	N/A	N/A	In Process	
Practitioner Engagement		Key Stakeholders	N/A	N/A	In Process	
oic Areas						
		IT Expectations	N/A	N/A	In Process	
			I			
	Progress Reporting	N/A	N/A	In Process		





Health		2. Finalize PPS-wide bed reduction plan.	N/A	N/A	In Process	NI/A
		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						
Health 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	



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							19/74
Integration		2. Develop a Clinical Integration strategy.	12/31/2016	N/A	Completed	Pass & Complete	N/A
							IV/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Clinical							N/A
Integration Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	19/7
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



	Total	0



AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AVs Awarded		Adjusted	Net AVs Awarded		
Adjustment	Project	Projects	Available	Net	Percentage	Aujusteu AVs	Net	Percentage AV	
	Project	Selected	Available	Awarded	AV	AVS	Awarded		
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	178.00	149.15	84%	0.00	149.15	84%	
Total			233.00	204.15	88%	0.00	204.15	88%	

No AV Adjustments
Please note that there are no AV adjustments for Westchester Medical Center in DY2, Q1



Payment Snapshot	
DY3, Q4 Payment Available	\$ 7,194,812
DY3, Q4 Payment Earned	\$ 4,755,143

			2.a.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	Complete	1.00	0.71	71%		27%	1,918,617	1,827,254			
	Patient Engagement Speed	N/A	0.00	0.00	0%							
	Domain 1 Subtotal		6.00	5.71	95%	40%	27%	1,918,617	1,827,254			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	479,654	479,654			
Domain 2	Domain 2 Pay for Performance (P4P	Complete	8.00	4.08	51%	50%	67%	4,796,541	2,448,235			
	Domain 2 Subtotal			19.08	83%	60%	73%	5,276,196	2,927,889			
	Total Complete			24.80	86%	100%	100%	7,194,812	4,755,143			

Total Project 2.a.i AVs Awarded: 24.8 out of 29

	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.	.71
Enter Revie	wer Commen	t				
Total					0.	.71

	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	Pass & Complete	0.14		
	Enter Revie	wer Commer	nt					
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	In Process	Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	In Process	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Pass & Complete			



	Enter Reviewer Comment							
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14		
	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 Revie	wer Commer	nt					
•	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	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	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.	3/31/2018	3/31/2018	Completed	Fail	0.00		
	Enter Reviewer Comment							



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 - Project	2.a.i		
Adult Access to Preventive or Ambulatory Care - 20 to 44 years				0.3333333
				0.3333333
				0.3333333
				0.555555
				1
				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		
	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	



Enter Reviewer Comment		
	Pass & Ongoing	1
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		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		15.00



	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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	Project Snapshot							
<b>Project Domain</b>	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, Q4 Payment Available	\$ 5,910,024
DY3, Q4 Payment Earned	\$ 3,891,001

			2.a.iii 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	Complete	1.00	0.60	60%		27%	1,576,006	1,485,949	
	Patient Engagement Speed	Complete	1.00	1.00	100%					
	Domain 1 Subtotal		7.00	6.60	94%	40%	27%	1,576,006	1,485,949	
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	394,002	394,002	
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.08	51%	50%	67%	3,940,016	2,011,050	
	Domain 2 Subtotal		23.00	19.08	83%	60%	73%	4,334,018	2,405,052	
	Total Complete		30.00	25.68	86%	100%	100%	5,910,024	3,891,001	

Total Project 2.a.iii AVs Awarded: 25.68 out of 30

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



	Module 2 - Project Implementation Speed	Ongoing	N/A	Completed	Pass & Ongoing	0.60
	Enter Reviewer Comment					
					Pass & Ongoing	1
Enter Reviewer Comment						
	Total					1.60

	Domain 1 Project Prescribed Milestones - Project 2.a.iii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Revie	ewer Commer	nt						
	2. Ensure all primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and/or Advanced Primary Care accreditation by Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	0.00			
	Enter Reviewer Comment								
	3. Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20			
	Enter Reviewer Comment								



	4. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	3/31/2018	3/31/2018	Completed	Fail	0.00		
	Enter Reviewer Comment							
	5. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20		
	Enter Revie	wer Commer	t					
	6. Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.20		
	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		
	Enter Reviewer Comment							
Total						0.60		



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



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		



Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS	
	1
reimbursement	
	1
	1
	1
	0.5
	0.5
	0.5
	0.5

Domain 2 Pay for Performance Project 2.a.iii



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

Payment Snapshot	
DY3, Q4 Payment Available	\$ 6,937,855
DY3, Q4 Payment Earned	\$ 4,673,416

	2.a.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%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%	40%	27%	1,850,095	1,850,095
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	100%	40%	27%	1,850,095	1,850,095
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	462,524	462,524
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.08	51%	50%	67%	4,625,236	2,360,798
	Domain 2 Subtotal		23.00	19.08	83%	60%	73%	5,087,760	2,823,321
	Total	Complete	30.00	26.08	87%	100%	100%	6,937,855	4,673,416

Total Project 2.a.iv AVs Awarded: 26.08 out of 30

	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	
	Enter Reviewer Comment						



Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00
Enter Revie	wer Commer	nt			
				Pass & Ongoing	1
Enter Revie	wer Commer	nt			
Total					2.00

	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
		wer Commer	nt			
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	1.00
	Enter Revie	wer Commer	nt			



•	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		N/A
						N/A
	Enter Revie	wer Commer	nt			
	6. Ensure that EHR systems used in Medical Villages meet Meaningful Use Stage 2			In Process	Pass & Ongoing	N/A
	Enter Revie	wer Commer	nt			
	7. Ensure that services which migrate to a different setting or location (clinic, hospitals, etc.) are supported by the comprehensive community needs assessment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A

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



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	



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

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

Westchester Medical Center - Project 2.a.iv



Domain 2 Pay for Performance Project 2.a.iv



Payment Snapshot	
DY3, Q4 Payment Available	\$ 5,524,588
DY3, Q4 Payment Earned	\$ 3,721,424

	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%	40%				
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%			27%	1,473,223	1,473,223	
	Patient Engagement Speed	Complete	1.00	1.00	100%						
	Domain 1 Subtotal		7.00	7.00	100%	40%	27%	1,473,223	1,473,223		
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	10%	7%	368,306	368,306		
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	8.00	4.08	51%	50%	67%	3,683,059	1,879,895		
	Domain 2 Subtotal			19.08	83%	60%	73%	4,051,364	2,248,200		
	Total	Complete	30.00	26.08	87%	100%	100%	5,524,588	3,721,424		

Total Project 2.b.iv AVs Awarded: 26.08 out of 30

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



Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	1.00
Enter Revie					
				Pass & Ongoing	1
Enter Reviewer Comment					
Total					2.00

	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 service or other appropriate community agency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.50	
	Enter Reviewer Comment						
	3. Ensure required social services participate in the project.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.50	
	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		



	Enter Revie	ewer Commer	nt		
	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	N/A
					N/A
					N/A
	Domain 2 Pay for Report	ing Project	2.b.iv		
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	ing Project	2.b.iv		0.3333333
•	I	ing Project	2.b.iv		0.3333333
•	I	ing Project	2.b.iv		0.3333333
•	I	ing Project	2.b.iv		
	I	ing Project	2.b.iv		



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		



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		



### Achievement Value (AV) Scorecard DY3, Q4 January 1, 2018 - March 31, 2018 (Payment Quarter) Westchester Medical Center - Project 2.b.iv

Primary Care - Length of Relationship - Q3	0.5
	0.5

Domain 2 Pay for Performance Project 2.b.iv



	Project Snapshot				
Project Domain   System Transformation Projects (Domain 2)					
Project ID	roject 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, Q4 Payment Available	\$ 6,395,932
DY3, Q4 Payment Earned	\$ 5,045,680

	2.d.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%		27%							
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40%		1,705,582	1,421,318					
	Patient Engagement Speed	Complete	1.00	0.00	0%									
	Domain 1 Subtotal		6.00	5.00	83%	40%	27%	1,705,582	1,421,318					
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	7%	426,395	426,395					
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	4.00	3.00	75%	50%	67%	4,263,955	3,197,966					
	Domain 2 Subtotal			7.00	88%	60%	73%	4,690,350	3,624,362					
	Total	Complete	14.00	12.00	86%	100%	100%	6,395,932	5,045,680					

Total Project 2.d.i AVs Awarded: 12 out of 14

	Domain 1 Project Milestones Project 2.d.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					



Module 2 - Project Implementation Speed	3/31/2017	3/31/2017	Completed	Pass & Complete	0.00
				Fail	0
Enter Revie	ewer Commer	t			
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						
					Pass & Complete		

Pass & Complete



_	Enter Reviewer Comment						
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	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 his/her designated PCP (see outcome measurements in #10).	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
•	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 improvement, must be set for each cohort at the beginning of each performance period.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
					Pass & Complete	N/A	
	Enter Revie	wer Commer	nt				
	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) care provided to UI, NU, and LU persons.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	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 Revie	wer Commer	t				
	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						
	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	



Developed to Developed the Developed 1	
Domain 2 Pay for Reporting Project 2.d.i	
C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	0.25
	0.25
	0.05
	0.25
	0.25
	1
	1
	1



Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	
Enter Reviewer Comment	
Total	4.00

	Domain 2 Pay for Performance Project 2.d.i		
AV Driving	Measure	Reviewer Status	Avardad
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
	Total		3.00

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	\$ 3,302,281
DY3, Q4 Payment Earned	\$ 2,146,483

	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%	1,320,912	
Domain 1	Project Implementation Speed	Complete	1.00	0.50	50%	40%			1,226,562
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	6.50	93%	40%	40%	1,320,912	1,226,562
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	2.00	2.00	100%	10%	10%	330,228	330,228
Domain 5	Domain 3 Pay for Performance	Complete	7.00	2.50	36%	50%	50%	1,651,141	589,693
	Domain 3 Subtotal			4.50	50%	60%	60%	1,981,369	919,921
	Total Complete			11.00	69%	100%	100%	3,302,281	2,146,483

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

	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			
	Enter Reviewer Comment								

Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.50		
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	Project Requirement and Metric/Deliverable  Required Committed Due Date  Due Date  Nilestone Status							
	•	<ol> <li>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.</li> </ol>	3/31/2018	3/31/2018	Completed	Pass & Complete	0.5			
		Enter Reviewer Comment								
		Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
3.a.i Model 1		Ent	er Reviewer	Comment						
	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.		3/31/2018	3/31/2018	Completed	Fail	0			
		Ent	er Reviewer	Comment						

	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	N/A
	Domain 3 Pay for	Reporting			
Follow-up care	for Children Prescribed ADHD Medications - Continuation F	Phase			0.5
					0.5
					1
	Domain 3 Pay for P	erformance			
Adherence to A	antipsychotic Medications for People with Schizophrenia				0
					0
					0.5
					0.5

Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	N/A	N/A
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Pass & Ongoing	0.5
P4P Measure DY3Q4		
	Pass & Ongoing	0.5
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Pass & Ongoing	1
P4P Measure DY3Q4		
Total		2.50

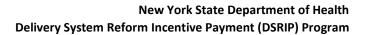


Payment Snapshot	
DY3, Q4 Payment Available	\$ 3,169,143
DY3, Q4 Payment Earned	\$ 2,150,490

	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%	40%	1,267,657	
Domain 1	Project Implementation Speed	Complete	1.00	1.00	100%				1,267,657
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		7.00	7.00	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	2.50	36%	50%	50%	1,584,572	565,918
	Domain 2 Subtotal		9.00	4.50	50%	60%	60%	1,901,486	882,833
	Total Complete			11.50	72%	100%	100%	3,169,143	2,150,490

Total Project 3.a.ii AVs Awarded: 11.5 out of 16

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





Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	1.00
Enter Reviewer Comment					
				Pass & Ongoing	1
Enter Reviewer Comment					
Total					2.00

	Domain 1 Project Prescribed Milestones - Project 3.a.ii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14			
	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.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14			
	Enter Reviewer Comment								
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.14			
	Enter Reviewer Comment								
					Pass & Complete	N/A			
	Enter Reviewer Comment								



5. Include at least one hospital with specialty psychiatric services and							
crisis-oriented psychiatric services; expansion of access to specialty	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
psychiatric and crisis-oriented services.							
Enter Revie	ewer 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	3/31/2018	3/31/2018	Completed	Pass & Complete	0.1		
hours).							
Enter Revie	ewer Commer	nt					
7. Deploy mobile crisis team(s) to provide crisis stabilization services	2/24/2040	2/24/2040	C	Dage & Campulate	0.1		
using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	Completed	Pass & Complete	0.1		
Enter Revie	ewer 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	3/31/2018	3/31/2018	Completed	Pass & Complete	0.1		
(secure messaging), alerts and patient record look up by the end of							
Demonstration Year (DY) 3.							
Enter Revie	ewer Commer	nt					
9. Establish central triage service with agreements among participating							
psychiatrists, mental health, behavioral health, and substance abuse	3/31/2018	3/31/2018	Completed	Pass & Complete	0.1		
providers.							
Enter Revio	Enter Reviewer Comment						
10. Ensure quality committee is established for oversight and surveillance	3/31/2017	2/21/2017	Completed	Pass & Complete	N1 /		
of compliance with protocols and quality of care.	3/31/201/	3/31/2017	Completed	rass & complete	N/		
Enter Reviewer Comment							



Domain 3 Pay for Reporting	
Domain's 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



Antidepressant Medication Management - Effective Acute Phase Treatment	Fail	0
P4P Measure DY3Q4		
	Pass & Ongoing	0.5
P4P Measure DY3Q4		
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		
	Pass & Ongoing	0.5
P4P Measure DY3Q4		
	Pass & Ongoing	0.5
P4P Measure DY3Q4		
	Fail	0
P4P Measure DY3Q4		



Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Fail	0
P4P Measure DY3Q4		
	Pass & Ongoing	1
P4P Measure DY3Q4		
Total		2.50



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, Q4 Payment Available	\$ 2,569,576
DY3, Q4 Payment Earned	\$ 2,569,576

	3.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%				
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

	Domain 1 Project Milestones Project 3.c.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							



	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 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 Commer	nt						
•	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment							
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Pass & Complete	N/A			
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 Commen	Enter Reviewer Comment						
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment							
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2017	Completed	Fail	N/A			
Enter Reviewer Comment							
Total							

	Domain 3 Pay for 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 DY3Q4							
	Comprehensive Diabetes screening – All Four Tests (HbA1c, lipid profile, dilated eye exam, nephropathy monitor)	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Flu Shots for Adults Ages 18 – 64	Pass & Ongoing	1					
	P4R Measure in DY3Q4							
	Health Literacy (QHL13, 14, and 16)	Pass & Ongoing	1					



P4R Measure in DY3Q4						
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333				
P4R Measure in DY3Q4						
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333				
P4R Measure in DY3Q4						
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333				
P4R Measure in DY3Q4						
Prevention Quality Indicator # 1 (DM Short term complication) ±	Pass & Ongoing	1				
P4R Measure in DY3Q4						
Total		6.00				



Payment Snapshot	
DY3, Q4 Payment Available	\$ 2,655,228
DY3, Q4 Payment Earned	\$ 1,991,421

	3.d.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%	40%	1,062,091	1,062,091	
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%	40%	1,062,091	1,062,091	
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	10%	10%	265,523	265,523	
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	2.00	1.00	50%	50%	50%	1,327,614	663,807	
	Domain 2 Subtotal		6.00	5.00	83%	60%	60%	1,593,137	929,330	
	Total Complete		12.00	11.00	92%	100%	100%	2,655,228	1,991,421	

Total Project 3.d.iii AVs Awarded: 11 out of 12

	Domain 1 Project Milestones Project 3.d.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	In Process	Pass & Ongoing	N/A			
	Enter Reviewer Comment								



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

	Domain 1 Project Prescribed Milestones - Project 3.d.iii								
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
•	1. Implement evidence-based asthma management guidelines between primary care practitioners, specialists, and community-based asthma programs (e.g., NYS Regional Asthma Coalitions) to ensure a regional population based approach to asthma management.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Deliver educational activities addressing asthma management to participating primary care providers.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	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
Domain 3 Pay for Reporting	
Asthma Medication Ratio (5 – 64 Years)	1
	0.5
	0.5
	1
	1
	Т
Domain 3 Pay for Performance	
Asthma Medication Ratio (5 – 64 Years)	1
	0
	0
	U



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

Westchester Medical Center - Project 3.d.iii

Total 1.00



Project Snapshot							
<b>Project Domain</b> Domain 4: Population-wide Projects: New York							
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	\$	1,970,008				
DY3, Q4 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, Q4)	Payment Available (\$)	Net Payment Earned (\$)	
	Domain 1 Organizational	Complete	5.00	5.00	100%		40%	788,003		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40%			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

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					



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		



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		



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

Westchester Medical Center - Project 4.b.i

Total 17.00

873,656

873,656



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

Westchester Medical Center - Project 4.b.ii

Payment Snapshot

60%

0%

60%

0%

Project Snapshot				
<b>Project Domain</b>	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			

Domain 4 Pay for Reporting (P4R)

Domain 4 Pay for Performance (P4P)

Domain 4

Troject Title	and Community Settings	in both chined									
4.b.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%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	40%	40%	582,437	582,437		
	Patient Engagement Speed	N/A	0.00	0.00	0%						
Domain 1 Subtotal			5.00	5.00	100%	40%	40%	582,437	582,437		

17.00

N/A

17.00

N/A

100%

N/A

Complete

N/A

	Domain 4 Pay for Performance and Pay for Reporting					
AV Driving	Measure	Reviewer Status	AVs Awarded			
	Percentage of premature death (before age 65 years)		1			



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		



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		



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

Westchester Medical Center - Project 4.b.ii

Total 17.00