Department of Health | Medicaid Redesign Team

Achievement Value (AV) Scorecard
Bassett Medical Center

Print Summary

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PPS Information	
Quarter	DY1, Q3 October 1, 2015 - December 31, 2015
PPS	Bassett Medical Center
PPS Number	22

Achievement Value (AV) Scorecard Summary								
Project Link (click on the purple link below to access each individual project report)	**AV Data**				**Payment Data**			
	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	Payment Available	Payment Earned	High Performance Funds	Total Payment Earned
Domain I - Organizational (All Projects)	5.00	4.00	0.00	4.00	*Organizational funds are embedded within each project's payment*			
2.a.ii	21.00	20.00	0.00	20.00	$ -	$ -	$ -	$ -
2.b.vii	21.00	20.00	0.00	20.00	$ -	$ -	$ -	$ -
2.b.viii	21.00	20.00	0.00	20.00	$ -	$ -	$ -	$ -
2.c.i	21.00	20.00	0.00	20.00	$ -	$ -	$ -	$ -
2.d.i	10.00	8.00	0.00	8.00	$ -	$ -	$ -	$ -
3.a.i	16.00	15.00	0.00	15.00	$ -	$ -	$ -	$ -
3.a.iv	16.00	15.00	0.00	15.00	$ -	$ -	$ -	$ -
3.d.iii	10.00	9.00	0.00	9.00	$ -	$ -	$ -	$ -
3.g.i	11.00	9.00	0.00	9.00	$ -	$ -	$ -	$ -
4.a.iii	16.00	15.00	0.00	15.00	$ -	$ -	$ -	$ -
4.b.i	14.00	13.00	0.00	13.00	$ -	$ -	$ -	$ -

Achievement Value (AV) Scorecard
Bassett Medical Center

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AV Adjustments (Column F)

Total	177.00	164.00	0.00	164.00	$ -	$ -	$ -	$ -

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Domain 1 Organizational AVs

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Domain I Organizational Scoresheet

Domain I Organizational	Review Status	AVs Available	AVs Awarded	Adjustments	Net AVs	AV
Workforce Strategy	Complete	1.00	1.00	0.00	1.00	100%
Section 01 - Budget	Complete	1.00	1.00	0.00	1.00	100%
Section 02 - Governance	Complete	1.00	1.00	0.00	1.00	100%
Section 03 - Financial Sustainability	Complete	1.00	0.00	0.00	0.00	0%
Section 04 - Cultural Competency & Health Literacy	Complete	1.00	1.00	0.00	1.00	100%
Section 05 - IT Systems and Processes	Complete	N/A	N/A	N/A	N/A	N/A
Section 06 - Performance Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Section 07 - Practitioner Engagement	Complete	N/A	N/A	N/A	N/A	N/A
Section 08 - Population Health Management	Complete	N/A	N/A	N/A	N/A	N/A
Section 09 - Clinical Integration	Complete	N/A	N/A	N/A	N/A	N/A
Section 10 - General Project Reporting	Complete	N/A	N/A	N/A	N/A	N/A
Total	**Complete**	**5.00**	**4.00**	**0.00**	**4.00**	**80%**

Net Organizational AVs Awarded: 4 out of 5

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Workforce Strategy

Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Workforce Strategy Budget Updates	🟢						
	🟢						
	🟢						
	🔴	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Domain 1 Organizational AVs

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Additional Workforce Strategy Budget Updates (non AV-driving)	🔴	2. Create a workforce transition roadmap for achieving defined target workforce	N/A	N/A	In Process	Pass & Ongoing	
	🔴	3. Perform detailed gap analysis between current state assessment of workforce and projected future state	N/A	N/A	In Process	Pass & Ongoing	1
	🟢	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	N/A	N/A	In Process	Pass & Ongoing	
	🔴	5. Develop training strategy	N/A	N/A	In Process	Pass & Ongoing	
Additional Workforce Strategy Topic Areas	🔴	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	N/A
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	

New York State Department of Health
Delivery System Reform Incentive Payment (DSRIP) Program
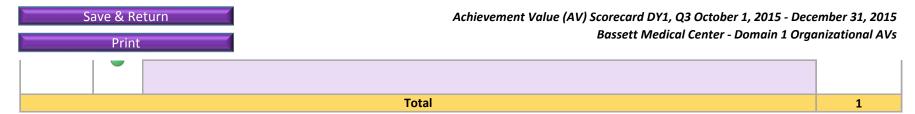
Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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		Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 01 - Budget							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Quarterly Project Reports, Project Budget and Flow of Funds	🟢	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	Pass & Ongoing	1
	🟢	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	
	🟢	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Ongoing	
	🟢	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass (with Exception) & Ongoing	
		The amounts and percentages reported in the Provider Import/Export Tool does not align with the amounts and percentages reported in MAPP. Please update all amounts and percentages to ensure alignment and accuracy during the DY1, Q4 reporting period.					
	🟢	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Domain 1 Organizational AVs

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	●						
				Total			1

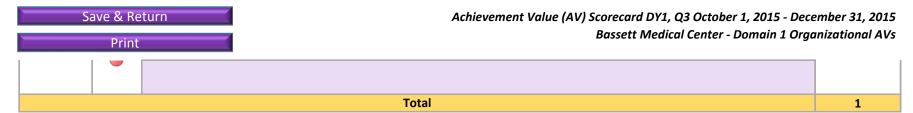| Section 02 - Governance							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Governance Structure Updates	●	1. Finalize governance structure and sub-committee structure	9/30/2015	9/30/2015	Completed	Pass & Complete	1
	●	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	
	●	3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	9/30/2015	Completed	Pass & Complete	
Governance Process Update	●	4. Establish governance structure reporting and monitoring processes	12/31/2015	12/31/2015	Completed	Pass & Complete	
	●	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	12/31/2015	12/31/2015	Completed	Pass & Complete	
	●	6. Finalize partnership agreements or contracts with CBOs	12/31/2016	12/31/2016	In Process	Pass & Ongoing	
Additional							

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Additional Governance Milestones (non AV-driving)		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	12/31/2016	In Process	Pass & Ongoing	N/A
		8. Finalize workforce communication and engagement plan	3/31/2017	3/31/2017	In Process	Pass & Ongoing	
		9. Inclusion of CBOs in PPS Implementation	12/31/2015	12/31/2015	Completed	Pass & Complete	
Additional Governance Topic Areas		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
		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	

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		Total					1

Section 03 - Financial Sustainability							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Financial Stability Update	🟢	1. Finalize PPS finance structure, including reporting structure	12/31/2015	12/31/2015	Completed	Pass & Complete	
	🟢	2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	🟢	3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	12/31/2015	Completed	Fail	0
		The documentation submitted was insufficient to demonstrate completion of the milestone. The PPS failed to submit the certification confirmation received from the New York State Office of Medicaid Inspector General (OMIG) indicating that the compliance program meets the requirements of the law and regulations. Failure to meet this milestone in DY1 Q3 will impact your payment in DY1 Q4. If you wish to appeal, you must do so within 5 business days. DY1 Q3 appeals will not be considered in subsequent periods.					
PPS Transition to Value Based Payment System	🟢	4. Develop detailed baseline assessment of revenue linked to value-based payment, preferred compensation modalities for different provider-types	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	🟢	5. Finalize a plan towards achieving 90% value-based payments across network by year 5 of the waiver at the latest	12/31/2016	12/31/2016	In Process	Pass & Ongoing	

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Additional PPS Transition to Value Based Payment System	🟢	6. Put in place Level 1 VBP arrangement for PCMH/APC care and one other care bundle or subpopulation	TBD	N/A	N/A	N/A	N/A
	🟢	7. Contract 50% of care-costs through Level 1 VBPs, and ≥ 30% of these costs through Level 2 VBPs or higher	TBD	N/A	N/A	N/A	
	🟢	8. ≥90% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 70% of total costs	TBD	N/A	N/A	N/A	
Additional Financial Stability Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	

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

Total							0

Section 04 - Cultural Competency & Health Literacy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Cultural Competency /Health Literacy	🟢	1. Finalize cultural competency / health literacy strategy.	12/31/2015	12/31/2015	Completed	Pass & Complete	1
	🟢	2. Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	6/30/2016	6/30/2016	In Process	Pass & Ongoing	
Additional Cultural Competency /Health Literacy	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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Topic Areas						
	●	IT Expectations	N/A	N/A	In Process	Pass & Ongoing
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing
Total						**1**

Section 05 - IT Systems and Processes							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
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).	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
	●	2. Develop an IT Change Management Strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	
	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	12/31/2016	In Process	Pass & Ongoing	
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	12/31/2016	In Process	Pass & Ongoing	

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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		Milestone	Required	Committed	Status	Reviewer Status	
	🔴	5. Develop a data security and confidentiality plan.	N/A	6/30/2016	In Process	Pass & Ongoing	
Additional IT Systems and Processes Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 06 - Performance Reporting							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Performanc	🔴	1. Establish reporting structure for PPS-wide performance reporting and communication.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Domain 1 Organizational AVs

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Performance Reporting		Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performance Reporting	🔴	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	12/31/2016	In Process	Pass & Ongoing	N/A
Additional Performance Reporting Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

Section 07 - Practitioner Engagement							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded

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Practitioner Engagement	🔴	1. Develop Practitioners communication and engagement plan.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop training / education plan targeting practioners and other professional groups, designed to educate them about the DSRIP program and your PPS-specific quality improvement agenda.	N/A	12/31/2016	In Process	Pass & Ongoing	
Additional Practitioner Engagement Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
	🔴	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
Total							**0**

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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Section 08 - Population Health Management					
Population Health	🔴	1. Develop population health management roadmap.	N/A	3/31/2017	In Process	Pass & Ongoing	N/A
	🔴	2. Finalize PPS-wide bed reduction plan.	N/A	3/31/2017	In Process	Pass & Ongoing	N/A
Additional Population Health Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	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	

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Total	0

Section 09 - Clinical Integration							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Clinical Integration	🔴	1. Perform a clinical integration 'needs assessment'.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop a Clinical Integration strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
Additional Clinical Integration Topic Areas	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	N/A
	🔴	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
	🔴	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
	🔴	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	

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Total	0

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AV Adjustment Scoresheet								
Adjustment	**AVs Per Project**	**Total Projects Selected**	**Total AVs Available**	**Total AVs Awarded**		**Adjusted AVs**	**Net AVs Awarded**	
				Net Awarded	**Percentage AV**		**Net Awarded**	**Percentage AV**
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	44.00	80%	0.00	44.00	80%
Project Adjustments (applied to one project only)	Various	11.00	122.00	120.00	98%	0.00	120.00	98%
Total			**177.00**	**164.00**	**93%**	**0.00**	**164.00**	**93%**

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☐ Organizational   ☐ Project Adjustments

No AV Adjustments
🔴 *Please note that there are no AV adjustments for Bassett Medical Center in DY1, Q3*

🟢

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.a.ii

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.a.ii
Project Title	Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the New York State Health Innovation Plan (SHIP))

Payment Snapshot		
Payment Available (DY1)	$	1,078,687.34
DY1 Initial Payment	$	647,212.41
DY1 Q2 Payment Earned	$	215,737.47
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	215,737.47
Funding Available for Distribution DY1Q3	$	-

	2.a.ii Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY1)	Domain Funding % (DY1, Q3)	Payment Available ($)	Net Payment Earned ($)
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	Domain 2 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**15.00**	**15.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**21.00**	**20.00**	**95%**	**100%**	**0%**	**-**	**-**

Total Project 2.a.ii AVs Awarded: 20 out of 21

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

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Bassett Medical Center - Project 2.a.ii

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	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					**1.00**

Domain 1 Project Prescribed Milestones - Project 2.a.ii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	1. Ensure that all participating PCPs in the PPS meet NCQA 2014 Level 3 PCMH accreditation and/or meet state-determined criteria for Advanced Primary Care Models by the end of DSRIP Year 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	2. Identify a physician champion with knowledge of PCMH/APCM implementation for each primary care practice included in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	3. Identify care coordinators at each primary care site who are responsible for care connectivity, internally, as well as connectivity to care managers at other primary care practices.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	4. Ensure all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A

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Bassett Medical Center - Project 2.a.ii

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🟢	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.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
🟢	7. Ensure that all staff are trained on PCMH or Advanced Primary Care models, including evidence-based preventive and chronic disease management.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
🟢	8. Implement preventive care screening protocols including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) for all patients to identify unmet needs. A process is developed for assuring referral to appropriate care in a timely manner.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
🟢	9. Implement open access scheduling in all primary care practices.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

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

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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.a.ii

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🟢	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Total		**15.00**

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Project Snapshot	
Project Domain	System Transformation Projects (Domain 2)
Project ID	2.b.vii
Project Title	Implementing the INTERACT project (inpatient transfer avoidance program for SNF)

Payment Snapshot		
Payment Available (DY1)	$	1,190,554.94
DY1 Initial Payment	$	714,332.96
DY1 Q2 Payment Earned	$	238,110.99
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	238,110.99
Funding Available for Distribution DY1Q3	$	-

2.b.vii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**15.00**	**15.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**21.00**	**20.00**	**95%**	**100%**	**0%**	**-**	**-**

Total Project 2.b.vii AVs Awarded: 20 out of 21

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.b.vii

●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1

Total	**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.vii						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
●	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
●	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	4. Educate all staff on care pathways and INTERACT principles.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
●	5. Implement Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	6. Create coaching program to facilitate and support implementation.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A

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🟢	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
🟢	8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
🟢	10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.b.vii

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●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1

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●	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
●	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
●	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
●	Potentially Avoidable Readmissions	Pass & Ongoing	1
●	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
●	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
TotalPage 29			**15.00**

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

Payment Snapshot		
Payment Available (DY1)	$	1,226,848.95
DY1 Initial Payment	$	736,109.37
DY1 Q2 Payment Earned	$	245,369.79
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	245,369.79
Funding Available for Distribution DY1Q3	$	-

		2.b.viii Scoresheet							
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**15.00**	**15.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**21.00**	**20.00**	**95%**	**100%**	**0%**	**-**	**-**

Total Project 2.b.viii AVs Awarded: 20 out of 21

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

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🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					**1.00**

Domain 1 Project Prescribed Milestones - Project 2.b.viii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Assemble Rapid Response Teams (hospital/home care) to facilitate patient discharge to home and assure needed home care services are in place, including, if appropriate, hospice.	6/30/2017	6/30/2017	In Process	Pass & Ongoing	N/A
🟢	2. Ensure home care staff have knowledge and skills to identify and respond to patient risks for readmission, as well as to support evidence-based medicine and chronic care management.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
🟢	3. Develop care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Educate all staff on care pathways and INTERACT-like principles.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
🟢	5. Develop Advance Care Planning tools to assist residents and families in expressing and documenting their wishes for near end of life and end of life care.	12/31/2015	12/31/2015	Completed	Pass & Complete	N/A

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🟢	6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
🟢	7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	8. Integrate primary care, behavioral health, pharmacy, and other services into the model in order to enhance coordination of care and medication management	9/30/2017	9/30/2017	Not Started	Pass & Ongoing	N/A
🟢	9. Utilize telehealth/telemedicine to enhance hospital-home care collaborations.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
🟢	10. Utilize interoperable EHR to enhance communication and avoid medication errors and/or duplicative services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	11. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
🟢	12. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.viii (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**

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●	Adult Access to Preventive or Ambulatory Care - 20 to 44 years	Pass & Ongoing	0.3333333
●	Adult Access to Preventive or Ambulatory Care - 45 to 64 years	Pass & Ongoing	0.3333333
●	Adult Access to Preventive or Ambulatory Care - 65 and older	Pass & Ongoing	0.3333333
●	CAHPS Measures - Care Coordination with provider up-to-date about care received from other providers	Pass & Ongoing	1
●	Children's Access to Primary Care- 12 to 19 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 12 to 24 months	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5

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●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
●	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
●	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
●	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.b.viii

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 2.c.i

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

Payment Snapshot		
Payment Available (DY1)	$	1,117,440.62
DY1 Initial Payment	$	670,464.37
DY1 Q2 Payment Earned	$	223,488.12
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	223,488.12
Funding Available for Distribution DY1Q3	$	-

2.c.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	15.00	15.00	100%	20%	0%	-	-
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**15.00**	**15.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**21.00**	**20.00**	**95%**	**100%**	**0%**	**-**	**-**

Total Project 2.c.i AVs Awarded: 20 out of 21

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Domain 1 Project Milestones - Project 2.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
🔴						

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●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

Domain 1 Project Prescribed Milestones - Project 2.c.i						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Create community-based health navigation services, with the goal of assisting patients in accessing healthcare services efficiently.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A
●	2. Develop a community care resource guide to assist the community resources and ensure compliance with protocols, under direction from a collaborating program oversight group of medical/behavioral health, community nursing, and social support services providers.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	3. Recruit for community navigators, ideally spearheaded by residents in the targeted area to ensure community familiarity.	9/30/2016	9/30/2016	In Process	Pass & Ongoing	N/A
●	4. Resource appropriately for the community navigators, evaluating placement and service type.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	5. Provide community navigators with access to non-clinical resources, such as transportation and housing services.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	6. Establish case loads and discharge processes to ensure efficiency in the system for community navigators who are following patients longitudinally.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A

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🟢	7. Market the availability of community-based navigation services.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
🟢	8. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

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

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●	Children's Access to Primary Care- 25 months to 6 years	Pass & Ongoing	0.25
●	Children's Access to Primary Care- 7 to 11 years	Pass & Ongoing	0.25
●	Getting Timely Appointments, Care and information (Q6, 8, 10, and 12)	Pass & Ongoing	0.5
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5
●	H-CAHPS – Care Transition Metrics	Pass & Ongoing	1
●	Medicaid Spending on ER and Inpatient Services ±	Pass & Ongoing	1
●	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
●	PDI 90– Composite of all measures +/-	Pass & Ongoing	1
●	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1

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●	Percent of PCP meeting PCMH (NCQA) or Advance Primary Care (SHIP) standards	Pass & Ongoing	1
●	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement	Pass & Ongoing	1
●	Potentially Avoidable Emergency Room Visits	Pass & Ongoing	1
●	Potentially Avoidable Readmissions	Pass & Ongoing	1
●	PQI 90 – Composite of all measures +/-	Pass & Ongoing	1
●	Primary Care - Length of Relationship - Q3	Pass & Ongoing	0.5
●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
Total			**15.00**

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Bassett Medical Center - Project 2.d.i

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

Payment Snapshot		
Payment Available (DY1)	$	1,050,544.98
DY1 Initial Payment	$	630,326.99
DY1 Q2 Payment Earned	$	192,599.91
DY1 Payment Not Earned to Date	$	17,509.08
DY1 Funding Remaining	$	210,109.00
Funding Available for Distribution DY1Q3	$	-

2.d.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**6.00**	**4.00**	**67%**	**80%**	**0%**	**-**	**-**
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	0%	-	-
	Domain 2 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**4.00**	**4.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**10.00**	**8.00**	**80%**	**100%**	**0%**	**-**	**-**

Total Project 2.d.i AVs Awarded: 8 out of 10

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

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●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	The PPS failed to meet at least 80% of its actively engaged commitments for DY1Q3. The documentation does not support the reported actively engaged numbers.					
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.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	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.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	4. Survey the targeted population about healthcare needs in the PPS' region.	12/31/2016	12/31/2016	Not Started	Pass & Ongoing	N/A
●	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A

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●	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	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	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.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	8. Include beneficiaries in development team to promote preventive care.	12/31/2016	12/31/2016	Not Started	Pass & Ongoing	N/A
●	9. Measure PAM® components	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
●	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	6/30/2017	6/30/2017	Not Started	Pass & Ongoing	N/A
●	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.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
●	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A

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🟢	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	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
🟢	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
🟢	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a	6/30/2016	6/30/2016	In Process	Pass & Ongoing	N/A
🟢	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	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 2 Pay for Performance and Pay for Reporting - Project 2.d.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
🟢	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and information	Pass & Ongoing	0.25
🟢	C&G CAHPS by PPS for uninsured- Patients' rating of the provider (or doctor)	Pass & Ongoing	0.25
🟢	C&G CAHPS by PPS for uninsured- How well providers (or doctors) communicate with patients	Pass & Ongoing	0.25

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	C&G CAHPS by PPS for uninsured- Helpful, courteous, and respectful office staff	Pass & Ongoing	0.25
	ED use by uninsured	Pass & Ongoing	1
	PAM Level	Pass & Ongoing	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	Pass & Ongoing	1
Total			**4.00**

NEW YORK STATE | **Department of Health** | **Medicaid Redesign Team**

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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		
Payment Available (DY1)	$	1,088,946.88
DY1 Initial Payment	$	653,368.13
DY1 Q2 Payment Earned	$	217,789.38
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	217,789.38
Funding Available for Distribution DY1Q3	$	-

3.a.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 3 Subtotal		**10.00**	**10.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**16.00**	**15.00**	**94%**	**100%**	**0%**	**-**	**-**

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Total Project 3.a.i AVs Awarded: 15 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
🟢						

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	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
●						
	Total					**1**

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3

☑ 3.a.i Model 1   ☑ 3.a.i Model 2   ☑ 3.a.i Model 3

Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
3.a.i Model 1	●	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	●	2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	●	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	In Process	Pass & Ongoing	N/A
	●	4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

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3.a.i Model 2	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A
	●	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	In Process	Pass & Ongoing	N/A
	●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
3.a.i Model 3	●	9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	10. Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	11. Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	12. Designate a Psychiatrist meeting requirements of the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	13. Measure outcomes as required in the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A

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🟢	14. Provide "stepped care" as required by the IMPACT Model.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
🟢	15. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
Total						**0**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
🟢	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
🟢	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
🟢	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
🟢	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1
🟢	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
🟢	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1

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●	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
●	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
●	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
●	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
●	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
●	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1
●	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
	Total		**10**

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.a.iv

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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.a.iv
Project Title	Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal services) capabilities and appropriate enhanced abstinence services within community-based addiction treatment programs

Payment Snapshot		
Payment Available (DY1)	$	1,083,472.28
DY1 Initial Payment	$	650,083.37
DY1 Q2 Payment Earned	$	216,694.46
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	216,694.46
Funding Available for Distribution DY1Q3	$	-

3.a.iv Scoresheet								
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**10.00**	**10.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**16.00**	**15.00**	**94%**	**100%**	**0%**	**-**	**-**

Total Project 3.a.iv AVs Awarded: 15 out of 16

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Domain 1 Project Milestones - Project 3.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
🔴						

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.a.iv

●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					**1.00**

Domain 1 Project Prescribed Milestones - Project 3.a.iv						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
●	1. Develop community-based addiction treatment programs that include outpatient SUD sites with PCP integrated teams, and stabilization services including social services.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
●	2. Establish referral relationships between community treatment programs and inpatient detoxification services with development of referral protocols.	12/31/2017	12/31/2017	In Process	Pass & Ongoing	N/A
●	3. Include a project medical director, board certified in addiction medicine, with training and privileges for use of buprenorphine and buprenorphine/naltrexone as well as familiarity with other withdrawal management agents.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	4. Identify and link to providers approved for outpatient medication management of opioid addiction who agree to provide continued maintenance therapy and collaborate with the treatment program and care manager. These may include practices with collocated behavioral health services, opioid treatment programs or outpatient SUD clinics.	12/31/2016	12/31/2016	Not Started	Pass & Ongoing	N/A
●	5. Develop community-based withdrawal management (ambulatory detoxification) protocols based upon evidence based best practices and	3/31/2017	3/31/2017	Not Started	Pass & Ongoing	N/A

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.a.iv

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●	6. Develop care management services within the SUD treatment program.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
●	7. Form agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
●	8. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
Total						**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.iv (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
●	Adherence to Antipsychotic Medications for People with Schizophrenia	Pass & Ongoing	1
●	Antidepressant Medication Management - Effective Acute Phase Treatment	Pass & Ongoing	0.5
●	Antidepressant Medication Management - Effective Continuation Phase Treatment	Pass & Ongoing	0.5
●	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Pass & Ongoing	1

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🟢	Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
🟢	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1
🟢	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5
🟢	Follow-up after hospitalization for Mental Illness - within 7 days	Pass & Ongoing	0.5
🟢	Follow-up care for Children Prescribed ADHD Medications - Continuation Phase	Pass & Ongoing	0.5
🟢	Follow-up care for Children Prescribed ADHD Medications - Initiation Phase	Pass & Ongoing	0.5
🟢	Engagement of Alcohol and Other Drug Dependence Treatment (initiation and 2 visits within 44 days)	Pass & Ongoing	0.5
🟢	Initiation of Alcohol and Other Drug Dependence Treatment (1 visit within 14 days)	Pass & Ongoing	0.5
🟢	Potentially Preventable Emergency Department Visits (for persons with BH diagnosis) ±	Pass & Ongoing	1

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.a.iv

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	Screening for Clinical Depression and follow-up	Pass & Ongoing	1
🟢			
Total			**10.00**

NEW YORK STATE Department of Health | Medicaid Redesign Team

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.d.iii

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

Payment Snapshot		
Payment Available (DY1)	$	822,137.90
DY1 Initial Payment	$	493,282.74
DY1 Q2 Payment Earned	$	150,725.28
DY1 Payment Not Earned to Date	$	13,702.30
DY1 Funding Remaining	$	164,427.58
Funding Available for Distribution DY1Q3	$	-

3.d.iii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		**6.00**	**5.00**	**83%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**4.00**	**4.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**10.00**	**9.00**	**90%**	**100%**	**0%**	**-**	**-**

Total Project 3.d.iii AVs Awarded: 9 out of 10

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Domain 1 Project Milestones - Project 3.d.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	In Process	Pass & Ongoing	N/A
🟢						

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.d.iii

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●	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
	Total					**1.00**

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.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	2. Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	12/31/2018	12/31/2018	In Process	Pass & Ongoing	N/A
●	3. Deliver educational activities addressing asthma management to participating primary care providers.	12/31/2016	12/31/2016	In Process	Pass & Ongoing	N/A
●	4. Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	3/31/2019	3/31/2019	In Process	Pass & Ongoing	N/A
●	5. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Total					**0.00**

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

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 3.d.iii

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●	Asthma Medication Ratio (5 – 64 Years)	Pass & Ongoing	1
●	Medication Management for People with Asthma (5 - 64 years) - 50% of Treatment days covered	Pass & Ongoing	0.5
●	Medication Management for People with Asthma (5 - 64 years) - 75% of Treatment days covered	Pass & Ongoing	0.5
●	Pediatric Quality Indicator # 14 Pediatric Asthma ±	Pass & Ongoing	1
●	Prevention Quality Indicator # 15 Younger Adult Asthma ±	Pass & Ongoing	1
	Total		**4.00**

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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		
Payment Available (DY1)	$	639,334.89
DY1 Initial Payment	$	383,600.93
DY1 Q2 Payment Earned	$	127,866.98
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	127,866.98
Funding Available for Distribution DY1Q3	$	-

3.g.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		**6.00**	**4.00**	**67%**	**80%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	20%	0%	-	-
	Domain 3 Pay for Performance (P4P	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 2 Subtotal		**5.00**	**5.00**	**100%**	**20%**	**0%**	**-**	**-**
	Total	**Complete**	**11.00**	**9.00**	**82%**	**100%**	**0%**	**-**	**-**

Total Project 3.g.i AVs Awarded: 9 out of 11

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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
🟢						

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015

Bassett Medical Center - Project 3.g.i

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🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Fail	0
	The PPS failed to meet at least 80% of its actively engaged commitments for DY1Q3. The documentation does not support the reported actively engaged numbers.					
	Total					**0.00**

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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Develop partnerships with community and provider resources including Hospice to bring the palliative care supports and services into	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Develop and adopt clinical guidelines agreed to by all partners including services and eligibility.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Engage staff in trainings to increase role-appropriate competence in palliative care skills and protocols developed by the PPS.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	6. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	Total					**0.00**

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

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AV Driving	Measure	Reviewer Status	AVs Awarded
●	Advanced Directives – Talked about Appointing for Health Decisions	Pass & Ongoing	1
●	Depressive feelings - percentage of members who experienced some depression feeling ±	Pass & Ongoing	1
●	Percentage of members who had severe or more intense daily pain ±	Pass & Ongoing	1
●	Percentage of members who remained stable or demonstrated improvement in pain	Pass & Ongoing	1
●	Percentage of members whose pain was not controlled ±	Pass & Ongoing	1
Total			**5.00**

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

Payment Snapshot		
Payment Available (DY1)	$	734,301.48
DY1 Initial Payment	$	440,580.89
DY1 Q2 Payment Earned	$	146,860.30
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	146,860.30
Funding Available for Distribution DY1Q3	$	-

4.b.i Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**4.00**	**80%**	**80%**	**0%**	**-**	**-**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	9.00	9.00	100%	20%	0%	-	-
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		**9.00**	**9.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**14.00**	**13.00**	**93%**	**100%**	**0%**	**-**	**-**

Total Project 4.b.i AVs Awarded: 13 out of 14

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY1)			
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
🟢	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1

Percentage of cigarette smoking among adults	Pass & Ongoing	1
Percentage of premature death (before age 65 years)	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
Total		**9.00**

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 4.a.iii

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Project Snapshot	
Project Domain	Domain 4: Population-wide Projects: New York's
Project ID	4.a.iii
Project Title	Strengthen Mental Health and Substance Abuse Infrastructure Across Systems

Payment Snapshot		
Payment Available (DY1)	$	638,523.02
DY1 Initial Payment	$	383,113.81
DY1 Q2 Payment Earned	$	127,704.60
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	127,704.60
Funding Available for Distribution DY1Q3	$	-

4.a.iii Scoresheet									
Domain	**Component**	**Review Status**	**AVs Available**	**Net AVs Awarded**	**Percentage AV**	**Domain Funding % (DY1)**	**Domain Funding % (DY1, Q3)**	**Payment Available ($)**	**Net Payment Earned ($)**
Domain 1	Domain 1 Organizational	Complete	5.00	4.00	80%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**4.00**	**80%**	**80%**	**0%**	**-**	**-**
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	20%	0%	-	-
	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-
	Domain 4 Subtotal		**11.00**	**11.00**	**100%**	**20%**	**0%**	**-**	**-**
Total		**Complete**	**16.00**	**15.00**	**94%**	**100%**	**0%**	**-**	**-**

Total Project 4.a.iii AVs Awarded: 15 out of 16

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY1)			
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
🟢	Age-adjusted suicide death rate per 100,000	Pass & Ongoing	1

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

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
Bassett Medical Center - Project 4.a.iii

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●	Percentage of adults with health insurance - Aged 18- 64 years	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years)	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Percentage of premature death (before age 65 years) – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1
●	Age-adjusted percentage of adult binge drinking during the past month	Pass & Ongoing	1
●	Age-adjusted percentage of adults who have a regular health care provider - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years	Pass & Ongoing	1
●	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Black non-Hispanics to White non-Hispanics	Pass & Ongoing	1
	Total Page 65		**11.00**