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 Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	
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

PPS Information	
Quarter	DY1, Q3 October 1, 2015 - December 31, 2015
PPS	The New York and Presbyterian Hospital
PPS Number	39

Achievement Value (AV) Scorecard Summary								
	AV Data				Payment Data			
Project Link (click on the purple link below to access each individual project report)	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	5.00	0.00	5.00	*Organizational funds are embedded within each project's payment*			
2.a.i	20.00	20.00	0.00	20.00	$ -	$ -	$ -	$ -
2.b.i	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
2.b.iii	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
2.b.iv	21.00	21.00	0.00	21.00	$ -	$ -	$ -	$ -
3.a.i	15.00	15.00	0.00	15.00	$ -	$ -	$ -	$ -
3.a.ii	16.00	16.00	0.00	16.00	$ -	$ -	$ -	$ -
3.e.i	13.00	13.00	0.00	13.00	$ -	$ -	$ -	$ -
3.g.i	10.00	10.00	0.00	10.00	$ -	$ -	$ -	$ -
4.b.i	14.00	14.00	0.00	14.00	$ -	$ -	$ -	$ -

Print Summary								
Print All								
4.c.i	16.00	16.00	0.00	16.00	$ -	$ -	$ -	$ -
AV Adjustments (Column F)								
Total	**167.00**	**167.00**	**0.00**	**167.00**	**$ -**	**$ -**	**$ -**	**$ -**

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Save & Return

Print

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

Net Organizational AVs Awarded: 5 out of 5

Hide Reviewer Comments

Workforce Strategy							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Workforce Strategy Budget Updates							

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Additional Workforce Strategy Budget Updates (non AV-driving)	🔴	1. Define target workforce state (in line with DSRIP program's goals)	N/A	N/A	In Process	Pass & Ongoing	
	🔴	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	
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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Additional Workforce Strategy Topic Areas	🔴						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							**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	

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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 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	Pass & Ongoing	1
	🟢	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	Pass & Complete	
	🟢	Module 1.4 - PPS Flow of Funds (Quarterly)	Ongoing	N/A	In Process	Pass & Ongoing	
	🟢	Quarterly Progress Reports	N/A	N/A	In Process	Pass & Ongoing	
Total							**1**

Section 02 - Governance							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Governance Structure	🟢	1. Finalize governance structure and sub-committee structure	9/30/2015	6/30/2015	Completed	Pass & Complete	
	🟢	2. Establish a clinical governance structure, including clinical quality committees for each DSRIP project	12/31/2015	12/31/2015	Completed	Pass & Complete	

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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Updates							1
	🟢	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	
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,	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	6. Finalize partnership agreements or contracts with CBOs	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	🔴	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
	🔴	8. Finalize workforce communication and engagement plan	12/31/2015	12/31/2015	Completed	Pass & Complete	

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	⬤	9. Inclusion of CBOs in PPS Implementation	3/31/2016	3/31/2016	In Process	Pass & Ongoing	
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	
Total							1

Section 03 - Financial Sustainability

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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	Pass & Complete	1
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	On Hold	Pass & Ongoing	
	●	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	

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Additional PPS Transition to Value Based Payment System	🟢	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	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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		Milestone				Reviewer Status	
	●	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total					**1**

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	
	●	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
Additional	●	Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	

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Cultural Competency /Health Literacy Topic Areas	🔴						N/A
	🔴	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							**1**

Section 05 - IT Systems and Processes							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
	🔴	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	3/31/2016	In Process	Pass & Ongoing	
	🔴	2. Develop an IT Change Management Strategy.	N/A	9/30/2016	In Process	Pass & Ongoing	
IT Systems							

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IT Systems and Processes	●	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	N/A	9/30/2016	In Process	Pass & Ongoing	N/A
	●	4. Develop a specific plan for engaging attributed members in Qualifying Entities	N/A	6/30/2016	In Process	Pass & Ongoing	
	●	5. Develop a data security and confidentiality plan.	N/A	3/31/2020	On Hold	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	

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Total		0

Section 06 - Performance Reporting							
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Performance Reporting	🔴	1. Establish reporting structure for PPS-wide performance reporting and communication.	N/A	3/31/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	N/A	6/30/2016	In Process	Pass & Ongoing	N/A
Additional Performanc	🔴	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

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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	🔴	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	9/30/2016	In Process	Pass & Ongoing	
	🔴	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	

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			Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
Additional Practitioner Engagement Topic Areas	●	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	N/A
	●	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 08 - Population Health Management							
Process Measure	**AV Driving**	**Milestone**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AV Awarded**
Population	●	1. Develop population health management roadmap.	N/A	9/30/2016	In Process	Pass & Ongoing	N/A

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Health		2. Finalize PPS-wide bed reduction plan.	N/A	6/30/2017	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	
Total							**0**

Section 09 - Clinical Integration

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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	9/30/2016	In Process	Pass & Ongoing	N/A
	🔴	2. Develop a Clinical Integration strategy.	N/A	6/30/2017	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	

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		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
	●						
Total							**0**

Save & Return

Print

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	10.00	50.00	50.00	100%	0.00	50.00	100%
Project Adjustments (applied to one project only)	Various	10.00	117.00	117.00	100%	0.00	117.00	100%
Total			**167.00**	**167.00**	**100%**	**0.00**	**167.00**	**100%**

Hide Reviewer Comments

☐ Organizational   ☐ Project Adjustments

No AV Adjustments
🔴 *Please note that there are no AV adjustments for The New York and Presbyterian Hospital in DY1, Q3*

🟢

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.a.i

Save & Return

Print

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

Payment Snapshot		
Payment Available (DY1)	$	1,249,016.35
DY1 Initial Payment	$	749,409.81
DY1 Q2 Payment Earned	$	249,803.27
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	249,803.27
Funding Available for Distribution DY1Q3	$	-

2.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	5.00	100%	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**	**5.00**	**100%**	**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**	**20.00**	**20.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 2.a.i AVs Awarded: 20 out of 20

Hide Reviewer Comments

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

Save & Return

Print

Total						**0.00**

Domain 1 Project Prescribed Milestones - Project 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.	3/31/2016	3/31/2016	In Process	Pass & Ongoing	N/A
🟢	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 & Ongoing	N/A
🟢	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 & Ongoing	N/A

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●	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	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.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
●	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.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
●	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	In Process	Pass & Ongoing	N/A
●	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	9/30/2018	9/30/2018	In Process	Pass & Ongoing	N/A
●	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 & Ongoing	N/A

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🟢	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	9/30/2018	9/30/2018	In Process	Pass & Ongoing	N/A
🟢	11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	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.a.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 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
Children's Access to Primary Care- 12 to 19 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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.b.i

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

Payment Snapshot		
Payment Available (DY1)	$	876,099.82
DY1 Initial Payment	$	525,659.89
DY1 Q2 Payment Earned	$	175,219.96
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	175,219.96
Funding Available for Distribution DY1Q3	$	-

2.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	5.00	100%	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**	**6.00**	**100%**	**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**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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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.i					
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Ensure Ambulatory ICU is staffed by or has access to a network of providers including medical, behavioral health, nutritional, rehabilitation and other necessary provider specialties that is sufficient to meet the needs of the target population.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	2. Ensure Ambulatory ICU is integrated with all relevant Health Homes in the community.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
🟢	3. Use EHRs and other technical platforms to track all patients engaged in the project, including collecting community data and Health Home referrals.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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

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	Total	0.00

Domain 2 Pay for Performance and Pay for Reporting - Project 2.b.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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.b.i

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	Measure	Status	AV
●	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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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●	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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●	Primary Care - Usual Source of Care - Q2	Pass & Ongoing	0.5
	Total		**15.00**

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.b.iii

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

Payment Snapshot		
Payment Available (DY1)	$	964,451.92
DY1 Initial Payment	$	578,671.15
DY1 Q2 Payment Earned	$	192,890.38
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	192,890.38
Funding Available for Distribution DY1Q3	$	-

2.b.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	5.00	100%	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**	**6.00**	**100%**	**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**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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Domain 1 Project Milestones - Project 2.b.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
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
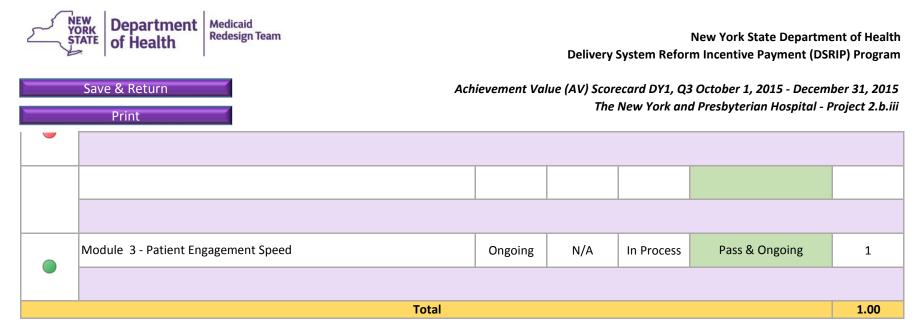*The New York and Presbyterian Hospital - Project 2.b.iii*

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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 2.b.iii						
AV Driving	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
🟢	1. Establish ED care triage program for at-risk populations	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	2. Participating EDs will establish partnerships to community primary care providers with an emphasis on those that are PCMHs and have open access scheduling. a. Achieve NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. b. Develop process and procedures to establish connectivity between the emergency department and community primary care providers.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A

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🟢	3. For patients presenting with minor illnesses who do not have a primary care provider: a. Patient navigators will assist the presenting patient to receive an immediate appointment with a primary care provider, after required medical screening examination, to validate a non-emergency need. b. Patient navigator will assist the patient with identifying and accessing needed community support resources. c. Patient navigator will assist the member in receiving a timely appointment with that provider's office (for patients with a primary care	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	4. Established protocols allowing ED and first responders - under supervision of the ED practitioners - to transport patients with non-acute disorders to alternate care sites including the PCMH to receive more appropriate level of care. (This requirement is optional.)	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
🟢	5. 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.iii (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

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

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●	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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.b.iii

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	Measure	Status	AV
●	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

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

Payment Snapshot		
Payment Available (DY1)	$	894,897.28
DY1 Initial Payment	$	536,938.37
DY1 Q2 Payment Earned	$	178,979.46
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	178,979.46
Funding Available for Distribution DY1Q3	$	-

2.b.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	5.00	100%	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**	**6.00**	**100%**	**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**	**21.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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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

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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.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	In Process	Pass & Ongoing	N/A
🟢	2. Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	3. Ensure required social services participate in the project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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🟢	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	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	In Process	Pass & Ongoing	N/A
🟢	6. Ensure that a 30-day transition of care period is established.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
🟢	7. 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.iv (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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 2.b.iv

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	Measure	Status	AV
●	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
●	Helpful, Courteous, and Respectful Office Staff (Q24 and 25)	Pass & Ongoing	0.5

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

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⬤	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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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 3.a.i

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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)	$	781,334.17
DY1 Initial Payment	$	468,800.50
DY1 Q2 Payment Earned	$	156,266.83
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	156,266.83
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	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**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**	**15.00**	**15.00**	**100%**	**100%**	**0%**	**-**	**-**

Hide Reviewer Comments   **Total Project 3.a.i AVs Awarded: 15 out of 15**

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	Not Started	Pass & Ongoing	N/A
Total						**0**

Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3							
☑ 3.a.i Model 1 ☑ 3.a.i Model 2 ☑ 3.a.i Model 3							
Model	**AV Driving**	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	🟢	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.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	🟢	2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
3.a.i Model 1							

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	●	3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	4. 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
3.a.i Model 2	●	5. Co-locate primary care services at behavioral health sites.	3/31/2018	3/31/2018	In Process	Pass & Ongoing	N/A
	●	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	In Process	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.	3/31/2017	3/31/2017	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
	●	9. Implement IMPACT Model at Primary Care Sites.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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3.a.i Model 3	●					
	●	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
	●	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)

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

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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
🟢	Follow-up after hospitalization for Mental Illness - within 30 days	Pass & Ongoing	0.5

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

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

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

Payment Snapshot		
Payment Available (DY1)	$	775,491.16
DY1 Initial Payment	$	465,294.69
DY1 Q2 Payment Earned	$	155,098.23
DY1 Payment Not Earned to Date	$	-
DY1 Funding Remaining	$	155,098.23
Funding Available for Distribution DY1Q3	$	-

	3.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	5.00	100%	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**	**6.00**	**100%**	**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**	**16.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 3.a.ii

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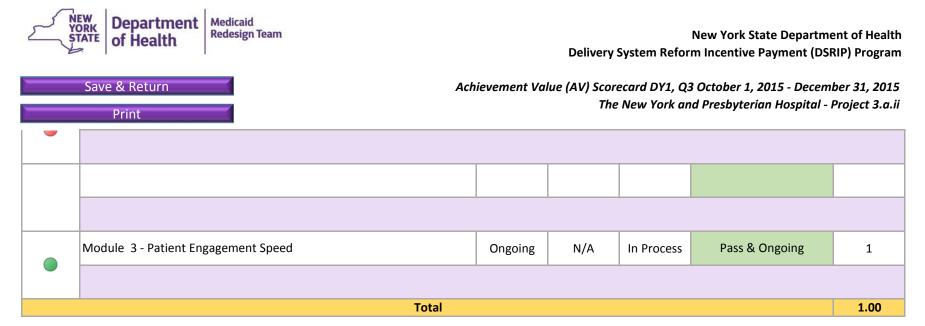
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🔴						
🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1
Total						**1.00**

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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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🟢						
🟢	11. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	NA
	Total					**0.00**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.a.ii (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

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●	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

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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 3.e.i

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Project Snapshot	
Project Domain	Clinical Improvement Projects (Domain 3)
Project ID	3.e.i
Project Title	Comprehensive project to decrease HIV/AIDS transmission—development of Center of Excellence management of HIV/AIDS

Payment Snapshot		
Payment Available (DY1)	$	681,410.97
DY1 Initial Payment	$	408,846.58
DY1 Q2 Payment Earned	$	136,282.19
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	136,282.19
Funding Available for Distribution DY1Q3	$	-

3.e.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	5.00	100%	0%	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**	**6.00**	**100%**	**0%**	**0%**	**-**	**-**
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	0%	0%	-	-
	Domain 3 Pay for Performance	N/A	N/A	N/A	N/A	0%	0%	-	-
Domain 3 Subtotal			**7.00**	**7.00**	**100%**	**0%**	**0%**	**-**	**-**
Total		**Complete**	**13.00**	**13.00**	**100%**	**0%**	**0%**	**-**	**-**

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

Domain 1 Project Milestones - Project 3.e.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.e.i Models 1, 2 and 3							
		☑ 3.e.i Model 1 ☑ 3.e.i Model 2					
Model	**AV Driving**	**Project Requirement and Metric/Deliverable**	**Required Due Date**	**Committed Due Date**	**Milestone Status**	**Reviewer Status**	**AVs Awarded**
	🟢	1. Develop a consulting/referral/educational relation with a center of excellence for management of HIV/AIDS that ensures early access to and retention in HIV and HCV Care – Scatter Model; ensure medical and behavioral health consultation expertise are available.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	🟢	2. Identify primary care providers who have significant case loads of patients infected with HIV.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	🟢	3. Implement training for primary care providers which will include consultation resources from the center of excellence.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A

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3.e.i Model 1	●	4. Develop coordination of care services with behavioral health and social services within or linking with the primary care providers' offices.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	5. Ensure systems are in place that address patient partnerships to care, ensure follow-up and retention in care, and promote adherence to medication management, monitoring and other requirements of evidence-based practice for management of HIV/AIDS.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	6. Institute a system to monitor quality of care with educational services where gaps are identified.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	7. Use EHRs or other IT platforms to track all patients engaged in this project.	3/31/2020	3/31/2020	On Hold	Pass & Ongoing	N/A
	●	8. Identify site location for a Center of Excellence (COE) which would provide access to the population infected with HIV (and/or HCV).	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A

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	●	9. Co-locate at this site services generally needed for this population including primary care, specialty care, dental care, behavioral health services, dietary services, high risk prenatal care and buprenorphine maintenance treatment.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	●	10. Co-locate care management services including Health Home care managers for those eligible for Health Homes.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	●	11. Develop a referral process and connectivity for referrals of people who qualify for but are not yet in a Health Home.	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
	●	12. Ensure understanding and compliance with evidence-based guidelines for management of HIV/AIDS (and HCV)	3/31/2017	3/31/2017	In Process	Pass & Ongoing	N/A
3.e.i Model 2							
	●	13. Ensure coordination of care between all available services preferably through a single electronic health/medical/care management record.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	●	14. Ensure that all PPS safety net providers are actively sharing EHR systems or other IT platforms with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look ups, by the end of DY 3.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A

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	🟢	15. Ensure that EHR systems or other IT platforms, used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
	🟢	16. 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
	🟢	17. Seek designation as center of excellence from New York State Department of Health.	9/30/2017	9/30/2017	In Process	Pass & Ongoing	N/A
Total							**0**

Domain 3 Pay for Performance and Pay for Reporting - Project 3.e.i (all Milestones are P4R in DY1)			
AV Driving	**Measure**	**Reviewer Status**	**AVs Awarded**
🟢	Cervical Cancer Screening	Pass & Ongoing	1
🟢	Chlamydia Screening (16 – 24 Years)	Pass & Ongoing	1
🟢	HIV/AIDS Comprehensive Care : Engaged in Care	Pass & Ongoing	1

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●	HIV/AIDS Comprehensive Care : Syphilis Screening	Pass & Ongoing	1
●	HIV/AIDS Comprehensive Care : Viral Load Monitoring	Pass & Ongoing	1
●	Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit	Pass & Ongoing	0.3333333
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication	Pass & Ongoing	0.3333333
●	Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies	Pass & Ongoing	0.3333333
●	Viral Load Suppression	Pass & Ongoing	1
	Total		**7**

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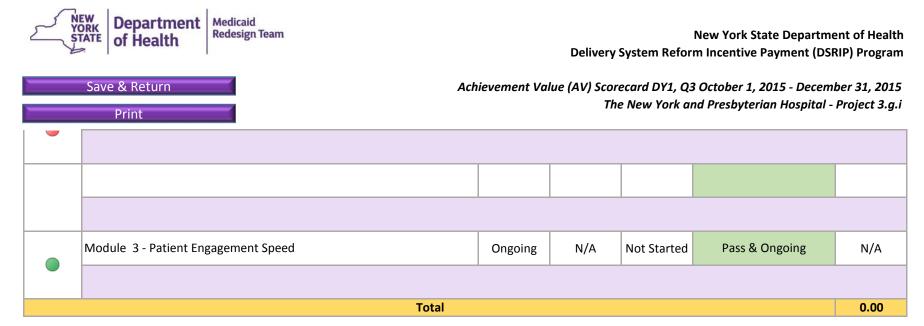*The New York and Presbyterian Hospital - Project 3.g.i*

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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)	$	481,884.38
DY1 Initial Payment	$	289,130.63
DY1 Q2 Payment Earned	$	96,376.88
DY1 Payment Not Earned to Date	$	0.00
DY1 Funding Remaining	$	96,376.88
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	5.00	100%	80%	0%	-	-
	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	0.00	0.00	0%				
	Domain 1 Subtotal		**5.00**	**5.00**	**100%**	**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**	**10.00**	**10.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 3.g.i AVs Awarded: 10 out of 10

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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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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🔴						
🟢	Module 3 - Patient Engagement Speed	Ongoing	N/A	Not Started	Pass & Ongoing	N/A
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.	3/31/2017	3/31/2017	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

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🟢	5. Engage with Medicaid Managed Care to address coverage of services.	3/31/2017	3/31/2017	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)			
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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 3.g.i

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Total	**5.00**

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

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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)	$	553,682.63
DY1 Initial Payment	$	332,209.58
DY1 Q2 Payment Earned	$	110,736.53
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	110,736.53
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	5.00	100%	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**	**5.00**	**100%**	**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**	**14.00**	**100%**	**100%**	**0%**	**-**	**-**

Total Project 4.b.i AVs Awarded: 14 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

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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 4.b.i

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	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

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Delivery System Reform Incentive Payment (DSRIP) Program

Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 4.b.i

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

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

Payment Snapshot		
Payment Available (DY1)	$	462,386.01
DY1 Initial Payment	$	277,431.61
DY1 Q2 Payment Earned	$	92,477.20
DY1 Payment Not Earned to Date	$	(0.00)
DY1 Funding Remaining	$	92,477.20
Funding Available for Distribution DY1Q3	$	-

4.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	5.00	100%	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**	**5.00**	**100%**	**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**	**16.00**	**100%**	**100%**	**0%**	**-**	**-**

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

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Domain 4 Pay for Performance and Pay for Reporting - Project 4.c.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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
The New York and Presbyterian Hospital - Project 4.c.i

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	Newly diagnosed HIV case rate per 100,000	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Black and White) of new HIV diagnoses	Pass & Ongoing	1
	Newly diagnosed HIV case rate per 100,000—Difference in rates (Hispanic and White) of new HIV diagnoses	Pass & Ongoing	1
	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

New York State Department of Health
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Achievement Value (AV) Scorecard DY1, Q3 October 1, 2015 - December 31, 2015
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🟢	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		**11.00**